



Medi-Cal

November 2024 | San Diego مقاطعة



Promise Health Plan



Promise Health Plan

LANGUAGE ASSISTANCE NOTICE

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

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

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

ប្រាសាទកម្ពុជា (Cambodian) ចំណាំ: បើសិនអ្នកត្រូវការជំនួយ ជាភាសារបស់អ្នក សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរព្រីល សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរព្រុំធំៗ ក៏មានដែរ។ ទូរស័ព្ទមកលេខ 1-855-699-5557 (TTY: 711)។ សេវាទាំងនេះមិនគិតថ្លៃឡើយ។

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

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

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

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

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

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

ແທກໂລພາສາລາວ (Laotian) ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ອັງ ມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕຮິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

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

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

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

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

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

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

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

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

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A. المقدمة

شكراً لاختياركم Blue Shield of California Promise Health Plan. يوفر لك دليل مقدم الخدمة قوائم العيادات والأطباء والمستشفيات والصيدليات، وأنواع مقدمي الرعاية الآخرين الذين يعدون جزءاً من Blue Shield Promise Health Plan.

1-800-977-2273

لا ترم بطاقة (BIC) Medi-Cal التعريفية. ستحتاج إلى استخدام بطاقة (BIC) Medi-Cal عند زيارة طبيب أسنان Medi-Cal الخاص بك، وكذلك للحصول على خدمات الرعاية الصحية الأخرى التي تغطيها Blue Shield of California Promise Health Plan.

عند انضمامك إلى Blue Shield of California Promise Health Plan، فإنه من المهم اختيار طبيب رعاية أولية (PCP) لكل عضو. وإذا لم تقم باختيار طبيب لنفسك، فستقوم Blue Shield Promise باختيار طبيب من أجلك. سوف يكون طبيب PCP الخاص بك هو الطبيب الذي ستذهب إليه للحصول على الرعاية الوقائية وعندما تكون مريضاً. كما سيقوم طبيب PCP بتوجيهك إلى طبيب متخصص أو مقدم خدمات متخصص آخر عند الحاجة. إن طبيب PCP موجود لتلبية احتياجات الرعاية الصحية الخاصة بك والعمل مع الأعضاء للحفاظ على صحتهم.

تغيير طبيب PCP الخاص بك

يمكنك تغيير طبيب الرعاية الأولية (PCP) المسؤول عنك في أي وقت من خلال الاتصال بخدمة رعاية العملاء لدى Blue Shield Promise [TTY: 711] 699-5557 (855). لن تكون التغييرات سارية حتى اليوم الأول من الشهر التالي. كما يمكنك أيضاً زيارة موقعنا الإلكتروني blueshieldca.com/promise.

بصفتك عضواً في Blue Shield of California Promise Health Plan، سوف تحصل على بطاقة تعريفية للعضوية مثل البطاقة المصورة في هذه الصفحة. وسوف تحتاج إلى إظهار هذه البطاقة التعريفية في كل مرة تقوم فيها بزيارة الطبيب، أو عند الحصول على الوصفات الطبية (الأدوية)، أو عند استخدام غرفة الطوارئ، أو عند زيارة طبيب العيون الخاص بك. احتفظ بهذه البطاقة معك في جميع الأوقات.

عندما تحصل على البطاقة التعريفية الخاصة بك، يرجى

	Promise Health Plan
Member: JOHN DOE Member ID: AAA123456789	
CIN: 123456789 Health Plan Group # E0001001	Information Information Line 2
Effective Date: MM/DD/YYYY	PCP Name Phone Number 1234 Street City, ST Zip

www.blueshieldca.com/promise

Customer Care	(800) 605-2556 (TTY: 711)
Provider Services	(800) 458-9395
Transportation	(800) 433-2178
Nurse Help Line	(800) 609-4166
Behavioral Health	(800) 765-9701 (TTY: 711)

The member has limited health care services in the state of California. This card is not a contract, policy, or document of coverage. It is provided for informational purposes only. Blue Shield of California Promise Health Plan is a health plan provided through Blue Shield of California Promise Health Plan. Please refer to the Blue Shield of California Promise Health Plan contract for a complete description of the plan's terms, conditions, and exclusions. Blue Shield of California Promise Health Plan is not a health plan provided through Blue Shield of California Promise Health Plan. Please refer to the Blue Shield of California Promise Health Plan contract for a complete description of the plan's terms, conditions, and exclusions. Blue Shield of California Promise Health Plan is not a health plan provided through Blue Shield of California Promise Health Plan. Please refer to the Blue Shield of California Promise Health Plan contract for a complete description of the plan's terms, conditions, and exclusions.

بطاقة تعريف الدرع الأزرق (BIC) Blue Shield

الخدمات الصيدلانية من خلال Medi-Cal Rx

، DHCS) Department of Health Care Services قسم خدمات الرعاية الصحية) يدير الخدمات الصيدلانية لأعضاء Medi-Cal. للخدمات الصيدلانية، يمكنك الاتصال على خط مركز الاتصال الخاص بـ Medi-Cal Rx على الرقم 1-800-977-2273 على مدار 24 ساعة طوال أيام الأسبوع، أو اتصل بـ TTY على رقم 711، من الإثنين إلى الجمعة، من الساعة 8 صباحاً حتى 5 مساءً.

تقبل معظم الصيدليات بـ Medi-Cal Rx. يمكنك الاتصال على خط مساعدة أعضاء Medi-Cal على الرقم (1-800-541-5555, TTY 1-800-430-7077) للاستفسار عما إذا كانت الصيدلية التي تتعامل معها تقبل بـ Medi-Cal Rx. إذا احتجت إلى المساعدة في البحث عن صيدلية، استخدم أداة البحث عن صيدليات Medi-Cal Rx عبر الإنترنت على الموقع الإلكتروني www.Medi-CalRx.dhcs.ca.gov أو اتصل على خط مركز الاتصال الخاص بـ Medi-Cal Rx على الرقم

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

التأكد من صحة البيانات المدونة. وإن كانت خاطئة، اتصل
بخدمة رعاية العملاء Blue Shield of California
Promise Health Plan على رقم **699-5557 (855)**.

المتخصصين والمستشفيات ومقدمي الدعم الآخرين،
بحسب الترتيب الأبجدي لاسم المدينة. ستجد في قسم
"شبكة مقدمي الخدمة Blue Shield Promise" معلومات
حول كيفية قراءة الأقسام المدرجة لمقدم الخدمة والعثور
علي المعلومات المهمة التي تحتاج إلى معرفتها عن كل
مقدم خدمة.

دليل مقدمي الخدمات لدى Blue Shield Promise

San - مقاطعة Medi-Cal

Diego

توفر Blue Shield Promise الوصول الكامل والمتساوي
إلى الخدمات المشمولة، بما في ذلك المسجلون ذوو
الإعاقة. يتم تقديم جميع مقدمي الخدمات، كما يجب عليهم
إكمال تدريب الكفاءة الثقافية.

خدمات الترجمة الفورية

لتسهيل الأمر عليك قامت Blue Shield Promise بتوفير:

- طاقم عمل ثنائي اللغة لمساعدتك بلغتك.
- خدمات الترجمة الفورية، بما في ذلك لغة الإشارة
الأمريكية، دون أي تكلفة وذلك لتلبية جميع احتياجات
الرعاية الصحية الخاصة بك. لست بحاجة إلى أن تطلب
مساعدة أصدقائك أو أفراد عائلتك ليترجموا لك. يمكنك
الحصول على خدمات الترجمة الفورية على مدار 24
ساعة في اليوم، 7 أيام في الأسبوع لكل مما يلي:
- ✓ الخدمات الطبية: زيارات الطبيب، وخدمات بعد
ساعات العمل، وخدمات الرعاية العاجلة،
وخدمات الصيدلة، ودروس الشقيف الصحي.
- ✓ الخدمات غير الطبية: خدمة العملاء وشكاوى
الأعضاء والاجتماعات التوجيهية للأعضاء.
- ✓ مواد بتسقيقات أخرى، مثل برايل للمكفوفين أو
الملفات الصوتية أو الملفات المطبوعة بحجم
كبير.

كل ما عليك القيام به هو الاتصال بمجموعتك الطبية أو
بخدمة رعاية العملاء Blue Shield Promise للحصول
على مواعيد محددة، تأكد من طلب مترجم فوري قبل
عشرة (10) أيام عمل على الأقل من موعدك.

معلومات مهمة عن قوائم الدليل

يتم تحديث دليل مقدمي الخدمات هذا وفقًا للتاريخ المدرج
على الغلاف الأمامي. قد تتم إضافة أو إزالة بعض أطباء
PCP بعد طباعة هذا الدليل. ولا يمكننا ضمان استقبال
أعضاء جدد من قبل كل طبيب PCP. للحصول على آخر
المعلومات حول بيانات أطباء PCP في منطقتك، يمكنك
زيارة الرابط blueshieldca.com/promise أو الاتصال
بخدمات أعضاء Blue Shield Promise على الرقم
المجاني

[711: TTY] **699-5557 (855)**.

أو عن طريق زيارة مكتبنا من الاثنين إلى الجمعة من
الساعة 8 صباحًا حتى 6 مساءً. وبممكنك الحضور دون
موعد مسبق لدينا طاقم عمل يتحدث لغتك. كما يمكنك
أيضًا زيارة موقعنا الإلكتروني

blueshieldca.com/promise.

معلومات وإفصاحات مهمة أخرى

لا يقدم بعض مقدمي الخدمات والمستشفيات واحدة أو
أكثر من الخدمات التالية التي قد تشملها الخطة الصحية
الخاصة بك التي ربما قد تحتاجها مثل تنظيم الأسرة أو
تنظيم النسل، بما في ذلك حالات طوارئ تنظيم النسل، أو
الإخصاء بما في ذلك عملية ربط الأنابيب وقت المخاض
والولادة أو علاج العقم أو الإجهاض. اتصل على هاتف
خدمات أعضاء Blue Shield Promise على الرقم
699-5557 (855) للتأكد من أنه يمكنك الحصول على
خدمات الرعاية الصحية التي تحتاج إليها.

لمزيد من المعلومات حول مقدمي الخدمة الخاصين بنا،
بما في ذلك شهاداتهم الدراسية وخبرتهم (مثل الكليات
الطبية التي درسوا فيها، وتدريب الأطباء المقيمين وحالة
الإجازة من مجلس الاختصاص)، يمكنك الاتصال بخدمة
رعاية العملاء Blue Shield Promise، أو استخدم أداة
البحث عن مقدم الرعاية المتوافرة على موقعنا الإلكتروني

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.blueshieldca.com/promise

قد تحتاج إلى ترخيص أو إحالة للوصول إلى بعض مقدمي الخدمات.

كيفية استخدام هذا الدليل:

يمكنك استخدام دليل مقدم الخدمة هذا لاختيار طبيب PCP المتعاقد مع Blue Shield Promise. يتم إدراج أسماء أطباء PCP، مع مقدمي الخدمات

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضّل بالزيارة عبر الإنترنت على [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

إشعار عدم التمييز

تعد ممارسة التمييز العنصري مخالفة للقانون. تلتزم Blue Shield of California Promise Health Plan بقوانين الحقوق المدنية للولايات وقوانين الحماية المدنية الفيدرالية، ولا تمارس Blue Shield of California Promise Health Plan التمييز بشكل غير قانوني ولا تستبعد أشخاصًا أو تفرق بينهم في المعاملة على أساس الجنس أو العرق أو اللون أو الدين أو النسب أو الأصل القومي أو تحديد المجموعة العرقية أو السن أو الإعاقة العقلية أو الجسدية أو الحالة الطبية أو المعلومات الجينية أو الحالة الاجتماعية أو النوع أو الهوية الجنسية أو الميول الجنسية.

تقدم خطة Blue Shield of California Promise Health Plan ما يلي:

- مساعدات وخدمات مجانية للأشخاص ذوي الإعاقات لمساعدتهم في التواصل بشكل أفضل، مثل:

✓ مترجمو لغة إشارة أكفاء

- ✓ معلومات مكتوبة بتنسيقات مختلفة (كأن تكون مطبوعة بأحرف كبيرة، أو مسجلة صوتيًا، أو تنسيقات إلكترونية يسهل الوصول إليها أو تنسيقات أخرى)

- خدمات لغوية مجانية للأشخاص الذين لا يتحدثون الإنجليزية كلغة أساسية، مثل:

✓ مترجمون فوريون أكفاء

✓ معلومات مكتوبة بلغات مختلفة

إذا كنت بحاجة إلى هذه الخدمات، يرجى التواصل مع Blue Shield of California Promise Health Plan من الساعة 8 صباحًا وحتى الساعة 6 مساءً، من الاثنين إلى الجمعة. اتصل بخدمة العملاء في منطقتك:

(Los Angeles) (800) 605-2556

(San Diego) (855) 699-5557

إذا كنت تعاني من صعوبات في السمع أو التحدث، يُرجى الاتصال بـ **TTY: 711**. يمكننا حال الطلب، توفير هذا المستند لك بلغة برايل، أو طباعته بأحرف كبيرة، أو تسجيله على شريط صوتي، أو في صورة نسخة إلكترونية. للحصول على نسخة في صورة أي من هذه التنسيقات البديلة، يرجى الاتصال أو مراسلة:

Blue Shield of California Promise Health Plan

Customer Care

3840 Kilroy Airport Way, Long Beach, CA 90806

(Los Angeles) (800) 605-2556

(San Diego) (855) 699-5557

TTY: 711

كيفية تقديم تظلم

إذا كنت تعتقد أن Blue Shield of California Promise Health Plan قد أخفقت في تقديم تلك الخدمات أو مارست التمييز بطريقة أخرى على أساس الجنس أو العرق أو اللون أو الدين أو السلالة أو الأصل القومي أو تحديد المجموعة العرقية أو العمر أو الإعاقة العقلية أو الجسدية أو الحالة الطبية أو المعلومات الجينية أو الحالة الاجتماعية أو النوع أو الهوية الجنسية أو الميول الجنسية، يمكنك تقديم تظلم إلى منسق الحقوق المدنية لدى Blue Shield of California Promise Health Plan. ويمكنك تقديم التظلم عن طريق الهاتف أو كتابيًا أو شخصيًا أو إلكترونيًا:

- عن طريق الهاتف: اتصل بمنسق الحقوق المدنية لدى Blue Shield of California Promise Health Plan من الساعة 8 صباحًا وحتى الساعة 6 مساءً، من الاثنين إلى الجمعة على الرقم (844) 883-2233. أو إذا كنت لا تستطيع السماع أو التحدث بشكل جيد، يُرجى الاتصال على TTY/TDD 711.

- **كتابياً:** املأ نموذج شكوى أو اكتب خطاباً وأرسله إلى:

Blue Shield of California Promise Health Plan Civil Rights Coordinator
3840 Kilroy Airport Way, Long Beach, CA 90806

- **شخصياً:** تفضل بزيارة عيادة طبيبك أو Blue Shield of California Promise Health Plan واذكر رغبتك في تقديم تظلم.
- **إلكترونياً:** تفضل بزيارة الموقع الإلكتروني لـ Blue Shield of California Promise Health Plan عبر الرابط www.blueshieldca.com/promise/medi-cal.

**مكتب الحقوق المدنية (OFFICE OF CIVIL RIGHTS) – إدارة خدمات الرعاية الصحية بولاية كاليفورنيا
(CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES)**

يمكنك أيضاً تقديم شكوى حقوق مدنية لدى مكتب الحقوق المدنية بإدارة خدمات الرعاية الصحية بولاية كاليفورنيا، عبر الهاتف أو كتابياً أو إلكترونياً:

- **عن طريق الهاتف:** اتصل على الرقم **916-440-7370**. إذا لم يكن بمقدورك التحدث أو السماع جيداً، يُرجى الاتصال على **711 (خدمة ترحيل الاتصالات)**.

- **كتابياً:** املأ نموذج الشكاوى أو أرسل خطاباً إلى:

**Deputy Director, Office of Civil Rights
Department of Health Care Services**

P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413

إن نماذج تقديم الشكاوى متاحة على http://www.dhcs.ca.gov/Pages/Language_Access.aspx

- **إلكترونياً:** يمكنك إرسال بريداً إلكترونياً إلى CivilRights@dhcs.ca.gov.

**مكتب الحقوق المدنية - وزارة الصحة والخدمات الإنسانية بالولايات المتحدة
(U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES)**

إذا كنت تعتقد أنك تعرضت للتمييز على أساس العرق أو اللون أو الأصل القومي أو السن أو الإعاقة أو الجنس، يمكنك أيضاً التقدم بشكوى بشأن الحقوق المدنية إلى وزارة الصحة والخدمات الإنسانية بالولايات المتحدة، مكتب الحقوق المدنية هاتفياً أو كتابياً أو إلكترونياً:

- **عن طريق الهاتف:** اتصل على الرقم **1-800-368-1019**. إذا كنت لا تستطيع التحدث أو السماع بشكل جيد، يُرجى الاتصال على **(TTY/TDD) 1-800-537-7697**.

- **كتابياً:** املأ نموذج الشكاوى أو أرسل خطاباً إلى:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

تتوفر نماذج الشكاوى على <http://www.hhs.gov/ocr/office/file/index.html>

- **إلكترونياً:** يرجى زيارة البوابة الإلكترونية لمكتب شكاوى الحقوق المدنية على الموقع الإلكتروني <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

شبكة مقدّمي خدمات Blue Shield Promise

تعريفات ومعلومات عامة

مفتاح دليل مقدّم الخدمة

- * | مقدّم الخدمة لا يقبل مرضى جدداً في هذه الشبكة الصحية
- 📍 | عنوان مقدّم الخدمة
- ☎️ | رقم هاتف مقدّم الخدمة
- 🕒 | رقم هاتف مقدّم الخدمة بعد ساعات العمل
- 🗣️ | اللغة المستخدمة في مكتب مقدّم الخدمة هذا
- 🕒 | ساعات عمل مقدّم الخدمة بسهولة
- 📱 | الوصول للمعلومات الموقع الإلكتروني
- 📧 | الخاص بمقدّم الخدمة

العيادة المجتمعية: هي عيادة طبية غير ربحية تقدم خدمات الرعاية الصحية لأعضاء Blue Shield Promise.

الطبيب العام وطبيب الأسرة: هم الأطباء المتخصصون في علاج الأطفال والبالغين من الرجال والنساء.

مركز صحي مؤهل اتحادياً (FQHC): هو منظمة مجتمعية توفر خدمات الرعاية الصحية الأولية والوقائية للأشخاص من جميع الفئات العمرية، دون النظر لإحالتهم المادية أو وضعهم في التأمين الصحي.

المستشفى: لدى Blue Shield Promise تعاقدات مع العديد من المستشفيات. تحقق من انتساب طبيب الرعاية الأولية الذي قمت باختياره إلى المستشفى.

الطب الباطني: هم الأطباء المتخصصون في علاج البالغين من الرجال والنساء فوق سن 18 عاماً.

رابطة الأطباء المستقلين (IPA): هو مركز الرعاية الصحية الذي تعاقد مع مجموعة من الأطباء لتقديم خدمات الرعاية الصحية.

المجموعة الطبية: مجموعة أطباء يقدمون خدمات الرعاية الصحية لأعضاء Blue Shield Promise.

طب التوليد وطب النساء: هم الأطباء المتخصصون في مجال صحة المرأة ورعاية الأمومة.

طب الأطفال: هم الأطباء المتخصصون في علاج الأطفال حتى سن 18 عاماً.

طبيب الرعاية الأولية (PCP): بصفتك عضواً في Blue Shield Promise، يجب أن تختار PCP لتلبية احتياجاتك الصحية العامة. إذا لم تقم باختيار PCP خاص بك، فسنقوم نحن باختيار طبيب لك. جميع أطباء PCP مصنّفون حسب المدينة. يمكنك اختيار أي من اختصاصات الأطباء التالية:

- طب التوليد وطب النساء
- طبيب أطفال

- الطبيب العام وطبيب الأسرة
- الطب الباطني

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

مؤشر إمكانية الوصول المادي لدليل مقدّم الخدمة

يمكنك العثور أدناه على معلومات حول احتياجات الوصول الأساسية لكبار السن والأشخاص ذوي الإعاقة (SPD) عند زيارة عيادة طبيب. نحن بدورنا نعلم أن للأعضاء احتياجات مختلفة. لذلك، نطلب من الأعضاء الاتصال بعيادة الطبيب لمناقشة احتياجات الوصول الخاصة بهم.

(Parking) P = موقف السيارات

توجد أماكن لوقوف السيارات، وأماكن مخصصة لوقوف سيارات النقل المغلقة، وجميعها سهلة الوصول. تتميز الممرات بمنحدرات أرضية بين مواقف السيارات والمكاتب ونقاط النزول.

(Restroom) R = المراحيض

أبواب المراحيض الوصول إليها سهل ويمكن فتحها بسهولة وهي واسعة بدرجة كافية لدخول الكرسي المتحرك أو الدراجة الصغيرة. يتميز المراحيض بمساحة كافية تسمح لمستخدمي الكرسي المتحرك أو الدراجة الصغيرة الدوران وإغلاق الباب. يوجد قضبان استناد تسمح بسهولة الانتقال من الكرسي المتحرك/ الدراجة إلى المراحيض. يمكن بسهولة الوصول إلى الحوض وكذلك الحنفيات والصابون ومناديل المراحيض واستخدامها.

(Exam Table/Scale) T = كرسي الفحص/ الميزان

تتحرك طاولة الفحص إلى الأعلى وإلى الأسفل، ويمكن الوصول إلى الميزان بسهولة مع وجود درابزين لمساعدة مستخدمي الكراسي المتحركة والدراجات الصغيرة. يمكن للميزان استيعاب كرسي متحرك.

(Exam Room) E = غرفة الفحص

المدخل المؤدي إلى غرفة الفحص سهل ومحدد بمسار واضح. الأبواب مفتوحة على اتساعها، بحيث تكفي المساحة لدخول كرسي متحرك أو دراجة صغيرة، كما أنها سهلة الفتح. تتميز غرفة الفحص بمساحة كبيرة بما يكفي لتسع كرسيًا متحركًا أو دراجة صغيرة.

(Exterior Building) EB = المبنى الخارجي

منحدرات الرصيف وغيرها من المنحدرات المؤدية إلى المبنى واسعة بما يكفي لممر كرسي متحرك أو دراجة صغيرة. يوجد درابزين على جانبي المنحدر. يوجد مدخل "سهل الوصول" إلى المبنى. الأبواب مفتوحة على اتساعها بما يكفي لدخول مستخدمي الكرسي المتحرك أو دراجة الصغيرة، فضلاً عن أنها مقدمة بمقابض سهلة الاستخدام.

(Interior Building) IB = المبنى الداخلي

الأبواب مفتوحة على اتساعها بما يكفي لدخول مستخدمي الكرسي المتحرك أو دراجة الصغيرة، فضلاً عن أنها مقدمة بمقابض سهلة الاستخدام. المنحدرات الداخلية واسعة بشكل كافٍ ولها درابزين. في حال وجود سلالم فهي ستكون مجهزة بدرابزين. في حال وجود مصعد، سيكون استخدامه متاحًا للعموم/ المرضى في جميع الأوقات التي يكون فيها المبنى مفتوحًا. المصعد مجهز بأصوات واضحة وأزرار بربل للمكفوفين موجودة في متناول اليد. يحتوي المصعد على مساحة كافية لمستخدمي الكرسي المتحرك أو مستخدمي الدراجة الصغيرة حتى يتمكنوا من تغيير اتجاه حركتهم. يمكن استخدام رافعة المنصة دون الحاجة إلى مساعدة، في حال وجودها.

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

توضيح رمز إمكانية الوصول



موقف السيارات	P
المبنى الخارجي	EB
المبنى الداخلي	IB
الكرسي المتحرك	W
المرحاض	R
غرفة الفحص	E
طاولة/ميزان الفحص	T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضّل بالزيارة عبر الإنترنت على [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

كيفية قراءة قائمة مقدم الخدمة

من شأن المعلومات التالية أن تقوم بمساعدتك على اختيار PCP الخاص بك.

مثلاً:

1. التخصص الطبي لمقدم الخدمة
2. اسم مقدم الخدمة، نوع الرخصة
3. رقم البطاقة التعريفية لمقدم الخدمة
4. جنس مقدم الخدمة
5. رقم الرخصة الخاصة بمقدم الخدمة
6. رقم NPI (معرف مقدم الرعاية الوطني) لمقدم الخدمة
7. اللغات التي يتحدث بها مقدمو الخدمة والموظفون
8. تدريب الكفاءة الثقافية
9. الانتساب إلى المستشفى
10. التخصص المعتمد:
11. اسم المجموعة الطبية FQHC/اسم المجموعة الطبية
12. عنوان مقدم الخدمة
13. رقم هاتف مقدم الخدمة
14. رقم فاكس مقدم الخدمة
15. الموقع الإلكتروني الخاص بمقدم الخدمة
16. عنوان البريد الإلكتروني لمقدم الخدمة
17. Medi-Cal Open Panel:
18. حد السن الأدنى والأقصى:
19. إمكانية الوصول للأشخاص ذوي الإعاقة
20. ساعات عمل مقدم الخدمة

1. طبيب أطفال
2. Doe, Jane, MD
3. الرقم التعريفي لمقدم الخدمة: 00A2123456
4. أنثى
5. رقم الرخصة 00A123456
6. NPI: 0123456789
7. الإنجليزية، الإسبانية، الفيتنامية، الفارسية، الكورية، الصينية، العربية.
8. نعم
9. Good Samaritan Hospital
10. طبيب أطفال
11. Northeast County Community Clinic
12. 3840 Kilroy Airport Way,
Long Beach, CA 90806
13. (855) 699-5557
14. (855) 699-5557
15. www.northeastclinic.com
16. doctordoe@gmail.com
17. نعم/لا
18. 0-18
19. محدود. P, EB, IB, E
20. الإثنين - الجمعة، الساعة 8 ص - 5 م

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

الوصول إلى معايير الرعاية في الوقت المناسب

نوع الموعد	يجب تحديد الموعد خلال
مواعيد الرعاية العاجلة التي لا تتطلب موافقة سابقة (تصريح سابق)	48 ساعة
مواعيد الرعاية العاجلة التي تتطلب موافقة سابقة (تصريح سابق)	96 ساعة
مواعيد الرعاية الصحية الأولية غير العاجلة	10 أيام عمل
المواعيد غير العاجلة لزيارة اختصاصي	15 أيام عمل
مقدم خدمة الصحة العقلية غير العاجلة (غير طبيب).	10 أيام عمل
تحديد موعد للخدمات المعاونة غير العاجلة لتشخيص أو علاج إصابة أو مرض أو أي حالة صحية أخرى	15 أيام عمل
وقت الانتظار على الهاتف خلال ساعات العمل العادية	10 دقيقة
فرز المرضى – على مدار الساعة وطوال أيام الأسبوع	على مدار الساعة وطوال أيام الأسبوع – لا تزيد على 30 دقيقة

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

This Doula Provider Directory is an addendum to the Blue Shield of California Promise Health Plan Provider Directory.

San Diego:

- 1. Brittany Negrete**
Phone #: 619-817-5901
- 2. Jessi Hughes**
Phone #: 619-206-4467
- 3. Joy Dunn Hurley**
Phone #: 619-277-1094
- 4. Angela Gordon-Nichols**
Phone #: 951-524-8876
- 5. Marisa Tervoort**
Phone #: 909-553-4616
- 6. Casey Hetzel-Ramos**
Phone #: 858-247-0009
- 7. For The Village, Inc.**
Phone #: 619-657-3384
Rendering Doulas Names:
Isabel Shawel
Leslie Meza
Lexus Carter
Allyson Coughenor
Elyde Arroyo
Jamaica Rich
Erikka Thorpe
- 8. Latania Knox**
Phone #: 619-248-1378
- 9. Frances Ayalasomayajula**
Phone #: 619-800-6443
- 10. The Wingwomen Inc.**
Phone #: 800-491-2142
Rendering Doulas Names:
Adonica Shaw
Natalie Jaconetty
Connaitre Tillman
Talitha Cumi Mcgirt
- 11. National Doula Network**
Phone #: 877-436-8527
Rendering Doulas Names:
Candace Caballero
Pamela Serna
Ellen Branch
Priscilla, Hsu
Amanda, Mcnair-Robinson
Brittany Negrete
Jasmin Castillo
LeeArtric Walker
Michelle Brenhaug

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-445-6200

After Hours Phone:
619-445-6200

License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:

619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 90000681

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A158569

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: NP95006360

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None





Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM

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SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: PA52347
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.mtnhealth.org

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SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE




Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 Fax: 619-205-6305
 After Hours Phone: 619-662-4100
 License Number: C172036
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103




 Phone: 619-662-4100
 Fax: 619-205-6305
 After Hours Phone: 619-662-4100
 License Number: DC28335
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.mtnhealth.org

BORREGO SPRINGS

BORREGO MEDICAL CLINIC

Provider ID: 185179
 4343 YAQUI PASS RD BORREGO SPRINGS, CA 92004
 Phone: 760-767-5051
 After Hours Phone: 760-767-5051
 License Number: C39104
 NPI: 1134144165
 Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

BORREGO MEDICAL CLINIC

Provider ID: 185179

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:
760-767-5051

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

BORREGO MEDICAL CLINIC

Provider ID: 185179

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:
760-767-5051

License Number: 80000651

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: Yes

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

BORREGO MEDICAL CLINIC

Provider ID: 185179

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:
760-767-5051

License Number: G85319

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH

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FOUNDTION

 Website: N/A


CAMPO


SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:
619-445-6200


License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A


SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:
619-445-6200

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A


SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906-2028


 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906-2028

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A18400

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: No

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *Website: N/A*

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

📍 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906-2028

☎ *Phone: 619-662-4100*

📞 *After Hours Phone: 619-662-4100*

License Number: 90000660

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 *Site English Spoken: Yes*

Cultural Competency: No

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *Website: N/A*

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

📍 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906-2028

☎ *Phone: 619-662-4100*

📞 *After Hours Phone: 619-662-4100*

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 *Site English Spoken: Yes*

Cultural Competency: No

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *Website: N/A*

CARLSBAD

TRUECARE

Provider ID: 480120

📍 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

☎ *Phone: 760-736-6767*

📞 *After Hours Phone: 760-736-6767*

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 *Site English Spoken: Yes*

Cultural Competency: No

🕒 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *Website: N/A*


TRUECARE


Provider ID: 480120

📍 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: A49273

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA
92008-1950

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA
92008-1950

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA
92008-1950

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA
92008-1950

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone:
760-736-6767

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA
92008-1950

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone:

760-736-6767

License Number: 80000630

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA
92008-1950

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone:
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

CHULA VISTA

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None



Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

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B. العيادات الصحية المؤهلة فيدراليًا



American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**

 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: G57243

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**



 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**



 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100
 After Hours Phone:


619-662-4100


License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N



 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100


License Number: G74728

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: G80234

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100


License Number: NP95015413

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA54404

NPI: 1598122871

Accepting New Patients: Yes


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: SP18192


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): **CHULA VISTA PEDIATRICS**

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

Fax: 619-425-1184

 After Hours Phone:
619-662-4100


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49591


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A82912

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200

CHULA VISTA, CA

91911-1353

Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200

CHULA VISTA, CA

91911-1353

Phone: 619-662-4100

Fax: 619-662-4196

After Hours Phone:

619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

CHULA VISTA FAMILY HLTH

CTR

Provider ID: 206355

251 LANDIS AVE

CHULA VISTA, CA

91910-2628

Phone: 619-515-2500

After Hours Phone:

619-515-2500

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH








CTR

Provider ID: 206355



251 LANDIS AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PA21591
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 Website: www.fhcsd.org




CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PT291706







NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PT292823
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PT293536
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT294245

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM


WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT295173

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT37189

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 Fax: 619-397-1161
 After Hours Phone:
 619-515-2500
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO


 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: A163183
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322



 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: A164392
 NPI: 1598122871

Accepting New Patients: Yes
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM

TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322



 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: A177922
 NPI: 1598122871

Accepting New Patients: Yes
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE

CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A41486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes



Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No






Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




B. العيادات الصحية المؤهلة فيدراليًا



SA 8:00AM-5:00PM
American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A50477
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM




American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

VISTA
Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A56153
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

VISTA
Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100


 After Hours Phone:
619-662-4100
License Number: A66903
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A69264
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A77936


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A80185

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A87650


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا




619-662-4100
License Number: A93785
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C55563
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100


License Number: DC20760
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT



PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: DC31963
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: DC33295
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: DDS102880
NPI: 1598122871
Accepting New Patients: Yes

Min/Max Age: 0\None
Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA
91910-2628
Phone: 619-515-2500
After Hours Phone:
619-515-2500
License Number: DC26269
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No
Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM



TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR





Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA
91910-2628
Phone: 619-515-2500
After Hours Phone:
619-515-2500
License Number: DPM4819
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No
Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*





CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 *Phone: 619-515-2500*
 *After Hours Phone: 619-515-2500*
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL): HEALTH CENTERS OF SAN DIEGO
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO





 *Website: www.fhcsd.org*
CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 *Phone: 619-515-2500*
 *After Hours Phone: 619-515-2500*
License Number: NM792
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): HEALTH CENTERS OF SAN DIEGO
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 *Website: www.fhcsd.org*
CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 *Phone: 619-515-2500*
 *After Hours Phone: 619-515-2500*
License Number: NP10943
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 *Website: www.fhcsd.org*
CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 *Phone: 619-515-2500*
 *After Hours Phone: 619-515-2500*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: NP23687

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: NP95001964

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM



SA 9:00AM-5:00PM

American Sign Language (ASL):






N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A14025
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A19485
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org






SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:

619-662-4100
License Number: 20A9060
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A106103
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100


License Number: A114600

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100


License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100


 After Hours Phone:
 619-662-4100


License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
 CHULA VISTA, CA
 91910-5736

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: A115699

NPI: 1598122871

Accepting New Patients: Yes


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A120672

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A121861

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

☎ *After Hours Phone:*
619-662-4100
License Number: A123263
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

🗣 *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
📍 678 3RD AVE
CHULA VISTA, CA
91910-5736
☎ *Phone:* 619-662-4100
☎ *After Hours Phone:*
619-662-4100
License Number: A123492
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
🗣 *Site English Spoken:* Yes
Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
📍 678 3RD AVE
CHULA VISTA, CA
91910-5736
☎ *Phone:* 619-662-4100
☎ *After Hours Phone:*
619-662-4100
License Number: A123604
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

🗣 *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
📍 678 3RD AVE
CHULA VISTA, CA
91910-5736
☎ *Phone:* 619-662-4100
☎ *After Hours Phone:*
619-662-4100
License Number: A127706
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

🗣 *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *Website:* www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A134303

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: A138474

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A159831

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
 CHULA VISTA, CA
 91910-5736

Phone: 619-662-4100
 After Hours Phone:
 619-662-4100

License Number: A162816

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

Phone: 619-515-2500
 After Hours Phone:
 619-515-2500

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

Phone: 619-515-2500
 After Hours Phone:
 619-515-2500

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

Phone: 619-515-2500
 After Hours Phone:
 619-515-2500

License Number: A177698

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500


License Number: A178499

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500


License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500


License Number: A72005

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A73172

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A78355

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: C174771

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: 20A14919

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500


License Number: A108228

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500


License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A148014

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A153344

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

📍 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

☎ Phone: 619-515-2500

🕒 After Hours Phone: 619-515-2500

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

📍 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

☎ Phone: 619-515-2500

🕒 After Hours Phone: 619-515-2500

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

📍 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

☎ Phone: 619-205-1360

🕒 After Hours Phone: 619-205-1360

License Number: A95959

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: 619-205-1376

After Hours Phone:
619-205-1376

License Number: A179598

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A123170

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: 619-662-4100

Fax: 619-336-2323

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A11087

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: 20A13225

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

252 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

352 L ST
CHULA VISTA, CA
91911-1208

Phone: 619-515-2325

After Hours Phone:
619-515-2325

License Number: A144995

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL):  Website: www.fhcsd.org
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

 After Hours Phone:
619-515-2325

License Number: PA19306

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: www.fhcsd.org


N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

Fax: 619-420-0660

 After Hours Phone:
619-515-2325

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC


Provider ID: 417641

 352 L ST
CHULA VISTA, CA

91911-1208

 Phone: 619-515-2325

Fax: 619-420-0660

 After Hours Phone:
619-515-2325

License Number: 550002305


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org


EL CAJON

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 526 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A163464

NPI: 1134155377

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2499

After Hours Phone:
619-515-2499

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: A160760

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: G50634

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:
619-795-5991

License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021-7416

Phone: 619-795-5991

Fax: 619-795-5992

After Hours Phone:
619-795-5991

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021-7416

Phone: 619-795-5991

Fax: 619-795-5992

After Hours Phone:
619-795-5991

License Number: 550003567

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795

Phone: 619-269-1262

After Hours Phone:
619-269-1262

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795

 *Phone: 619-312-0347*


 *After Hours Phone: 619-312-0347*

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795

 *Phone: 619-312-0347*

 *After Hours Phone: 619-312-0347*

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 *Website: www.lamaestra.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*


 *After Hours Phone: 619-515-2498*


License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PT292482

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: PT295173


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:

619-515-2498

License Number: RN810863


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:

619-515-2498


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:

619-515-2498

License Number: 20A19473


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

Fax: 619-269-0191

After Hours Phone:
619-515-2498

License Number: 550003553

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:

619-515-2498

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: DC33869

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No



Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):




N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*
License Number: G78814
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON


Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*


License Number: NM1721
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*

License Number: NP15444
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO



 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*

License Number: NP95000205
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009180

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

Fax: 619-593-7164

 After Hours Phone:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

619-515-2499
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

🌐 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

📍 1111 W CHASE AVE
EL CAJON, CA 92020-5710

☎ Phone: 619-515-2499

🕒 After Hours Phone:
619-515-2499

License Number: A170055

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN

DIEGO

🌐 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

📍 1111 W CHASE AVE
EL CAJON, CA 92020-5710

☎ Phone: 619-515-2499

🕒 After Hours Phone:
619-515-2499

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

🌐 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

📍 1111 W CHASE AVE
EL CAJON, CA 92020-5710

☎ Phone: 619-515-2499

🕒 After Hours Phone:
619-515-2499

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: 20A13700

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: A138887

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:
619-401-0404

License Number: A151547

NPI: 1134144165


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
 **Hours:** SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION


 **Website:** N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 **Phone:** 619-401-0404


 **After Hours Phone:**
 619-401-0404

License Number: A158569


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 **Site English Spoken:** Yes

Cultural Competency: No


 **Hours:** SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION


 **Website:** N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 **Phone:** 619-401-0404

 **After Hours Phone:**
 619-401-0404

License Number: A98486


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 **Site English Spoken:** Yes

Cultural Competency: No

 **Hours:** SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION


 **Website:** N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 **Phone:** 619-401-0404

 **After Hours Phone:**
 619-401-0404

License Number: G52812


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 **Site English Spoken:** Yes

Cultural Competency: No

 **Hours:** SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION


 **Website:** N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 **Phone:** 619-401-0404

 **After Hours Phone:**
 619-401-0404

License Number: NP95001710



NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: BORREGO
 COMMUNITY HEALTH
 FOUNDTION

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
 619-873-8940


License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: BORREGO
 COMMUNITY HEALTH
 FOUNDTION

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
 619-873-8940


License Number: A114674

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: BORREGO
 COMMUNITY HEALTH
 FOUNDTION


 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
 619-873-8940


License Number: DPM1536

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
 MO 8:00AM-8:00PM
 TU 8:00AM-8:00PM
 WE 8:00AM-8:00PM
 TH 8:00AM-8:00PM
 FR 8:00AM-8:00PM
 SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: BORREGO
 COMMUNITY HEALTH
 FOUNDTION

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
 619-873-8940

License Number: PA16673

NPI: 1134144165

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH


FOUNDTION

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: A113241


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL): **CENTRO MEDICO EL CAJON**


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH


FOUNDTION

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522

 After Hours Phone:
619-873-8940


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO


COMMUNITY HEALTH

FOUNDTION


 Website: N/A

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522


 After Hours Phone:
619-873-8940

License Number: 550000430


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: Yes

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH


FOUNDTION


 Website: N/A

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795

 Phone: 619-312-0347

 After Hours Phone:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.B العيادات الصحية المؤهلة فيدراليًا

619-312-0347
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone: 619-312-0347

License Number: A68184
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone: 619-312-0347

License Number: PA58466
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0348
 After Hours Phone: 619-312-0348

License Number: G45632
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
 Website: www.lamaestra.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A152462

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A175325

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A72005


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A83390

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON



Provider ID: 418340

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

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

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

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N
 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

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

License Number: A127798

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدراليًا

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A134303

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A138815

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A144974

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A147976

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT293536


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN


DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13060


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A107093
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

📍 525 E MAIN ST
EL CAJON, CA 92020-4007
☎ Phone: 619-515-2498
🕒 After Hours Phone: 619-515-2498

License Number: A108228
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
☎ Phone: 619-662-4100
🕒 After Hours Phone: 619-662-4100

License Number: A101888
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
☎ Phone: 619-662-4100
🕒 After Hours Phone: 619-662-4100

License Number: A120584
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

875 EL CAJON BLVD
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

875 EL CAJON BLVD
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

875 EL CAJON BLVD
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 550002514

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

875 EL CAJON BLVD
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog




























Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: NP95012943</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p>	<p>619-662-4100</p> <p>License Number: PT40025</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: NP95009329</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: PT42665</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: NP95012943</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: PT40025</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Spanish, Tagalog
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

☎ Phone: 619-662-4100

📞 After Hours Phone:
619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM

SA 8:00AM-5:00PM
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

☎ Phone: 619-662-4100

📞 After Hours Phone:
619-662-4100

License Number: A131365

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

☎ Phone: 619-662-4100

📞 After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A


SAN YSIDRO HEALTH EL CAJON


Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A40473

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A79338

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A87650

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A96002

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes


 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A


SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD

EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100


License Number: G43179

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

ENCINITAS

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

Fax: 760-736-8740

 After Hours Phone:
760-753-7842

License Number: 80000638


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 After Hours Phone:
760-753-7842

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

 Website: N/A


TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

Fax: 760-736-8740

 After Hours Phone:
760-753-7842

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-736-6767

 After Hours Phone:


760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: DC29074

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

TRUECARE

Provider ID: 480243

📍 1130 2ND ST
ENCINITAS, CA
92024-5008

☎ Phone: 760-736-6767

🕒 After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

🌐 Website: N/A

TRUECARE

Provider ID: 480243

📍 1130 2ND ST
ENCINITAS, CA
92024-5008

☎ Phone: 760-736-6767

🕒 After Hours Phone:
760-736-6767

License Number: PA19437

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

TRUECARE

Provider ID: 480243

📍 1130 2ND ST
ENCINITAS, CA
92024-5008

☎ Phone: 760-736-6767

🕒 After Hours Phone:

760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

TRUECARE

Provider ID: 480243

📍 1130 2ND ST
ENCINITAS, CA
92024-5008

☎ Phone: 760-753-7842

🕒 After Hours Phone:
760-753-7842

License Number: A103940

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 After Hours Phone:
760-753-7842

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: N/A

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


 Website: N/A


ESCONDIDO

**SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE**

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C171064

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

**SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE**

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: G58033

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A



**SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE**

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95005999
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER



Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP95006360
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE



Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: PA20490
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM

SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE



Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: PA52347
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: N/A


SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

Fax: 619-662-7952

 After Hours Phone:
619-662-4100


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A


NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY


Provider ID: 206271

 728 E VALLEY PKWY

ESCONDIDO, CA

92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A94128


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900


 After Hours Phone:
760-737-6900

License Number: DPM5260


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: G61829


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM


SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: NP8169

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A


NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

 After Hours Phone:
760-737-6900

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A


NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748


 After Hours Phone:
760-737-6900


License Number: 80000158

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775




 426 N DATE ST
ESCONDIDO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.B العيادات الصحية المؤهلة فيدرالياً






92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900
License Number: A56054
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900
License Number: A62467
NPI: 1598122871
Accepting New Patients: Yes







Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900
License Number: A67626
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM

FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900
License Number: G83438
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


SOUTHERN CALIFORNIA


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: NP4799

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A


**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900


Fax: 360-462-2747

 After Hours Phone:
760-690-5900

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A


**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747

 After Hours Phone:
760-690-5900


License Number: 550000511

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900


License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A140398


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900


 After Hours Phone:
760-737-6900

License Number: A145349


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A120348


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ Phone: 760-737-6900

🕒 After Hours Phone:
760-737-6900

License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRIC AND PRENATAL

Provider ID: 206266

📍 425 N DATE ST
ESCONDIDO, CA
92025-3413

☎ Phone: 760-520-8340

Fax: 360-462-2752

🕒 After Hours Phone:
760-520-8340

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

📍 460 N ELM ST
ESCONDIDO, CA
92025-3002

☎ Phone: 760-520-8100

🕒 After Hours Phone:
760-520-8100

License Number: A45413

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

📍 460 N ELM ST
ESCONDIDO, CA
92025-3002

☎ Phone: 760-520-8100

🕒 After Hours Phone:
760-520-8100

License Number: A61751

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100

After Hours Phone:
760-520-8100

License Number: A78116

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100

After Hours Phone:

760-520-8100

License Number: A82173

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100

After Hours Phone:
760-520-8100

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100

After Hours Phone:
760-520-8100

License Number: DC12036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
 ESCONDIDO, CA
 92025-3002
 Phone: 760-520-8100
 After Hours Phone:
 760-520-8100
 License Number: DC28605
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270

460 N ELM ST
 ESCONDIDO, CA
 92025-3002
 Phone: 760-520-8100
 After Hours Phone:
 760-520-8100

License Number: G61829
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
 ESCONDIDO, CA
 92025-3002
 Phone: 760-520-8100
 Fax: 360-466-2745
 After Hours Phone:
 760-520-8100

NPI: 1598122871
 Accepting New Patients: Yes

Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
 ESCONDIDO, CA
 92025-3002
 Phone: 760-520-8100
 Fax: 360-466-2745
 After Hours Phone:
 760-520-8100






License Number: 80000397
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org






NEIGHBORHOOD HEALTHCARE ESCONDIDO


Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A107557
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org





NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A109655
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO





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

 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A119661
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A120771
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
 ESCONDIDO, CA
 92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone: 760-520-8100*


License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
 ESCONDIDO, CA
 92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone: 760-520-8100*

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
 ESCONDIDO, CA
 92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone: 760-520-8100*


License Number: A159727

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
 ESCONDIDO, CA
 92025-4604

 *Phone: 760-520-8200*

 *After Hours Phone:*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

760-520-8200
License Number: A101773
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: 760-520-8200

After Hours Phone:
760-520-8200

License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: 760-520-8200

After Hours Phone:
760-520-8200

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: 760-520-8200

After Hours Phone:
760-520-8200

License Number: PA51508

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
Phone: 760-520-8200
Fax: 360-462-2749
After Hours Phone:
760-520-8200
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
Phone: 760-520-8200
Fax: 360-462-2749
After Hours Phone:
760-520-8200
License Number: 550000697
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
Phone: 760-520-8200
Fax: 360-462-2749

After Hours Phone:
760-520-8200
License Number: 80000397
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
Phone: 760-520-8200
Fax: 360-462-2749

After Hours Phone:
760-520-8200
License Number: 80000483
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

425 N DATE ST
ESCONDIDO, CA
92025-3413

Phone: 760-520-8340

After Hours Phone:
760-520-8340

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

425 N DATE ST
ESCONDIDO, CA
92025-3413

Phone: 760-520-8340

After Hours Phone:
760-520-8340

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100

After Hours Phone:
760-520-8100

License Number: 20A14292

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

FALLBROOK

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA
92028-2912

Phone: 760-723-6200

After Hours Phone:
760-723-6200

License Number: NP95003447

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

📍 1328 S MISSION RD
FALLBROOK, CA
92028-4006

☎ Phone: 760-451-4770

🕒 After Hours Phone:
760-451-4770

License Number: A169529

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): 🌐 Website: N/A
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

📍 1328 S MISSION RD
FALLBROOK, CA
92028-4006

☎ Phone: 760-451-4720

Fax: 760-451-4700

🕒 After Hours Phone:
760-451-4720

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

🌐 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

📍 1328 S MISSION RD
FALLBROOK, CA
92028-4006

☎ Phone: 760-451-4720

Fax: 760-451-4700

🕒 After Hours Phone:
760-451-4720

License Number: 80000150

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

Phone: 619-429-3733

After Hours Phone:
619-429-3733

License Number: A51447

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

949 PALM AVE
IMPERIAL BEACH, CA

91932-1503

Phone: 619-429-3733

After Hours Phone:
619-429-3733

License Number: A66830

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

LA MESA

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

Phone: 619-464-6434

After Hours Phone:
619-464-6434

License Number: NP95017921

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:

619-464-6434

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes



Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION
 Website: N/A

LA MESA PEDIATRICS






Provider ID: 480827
 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109
 After Hours Phone: 619-464-6434
License Number: 20A11733
NPI: 1134144165
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: BORREGO

COMMUNITY HEALTH FOUNDTION

LA MESA PEDIATRICS


Provider ID: 480827
 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109
 After Hours Phone: 619-464-6434
License Number: 550000430
NPI: 1134144165
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: Yes
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM




American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION


LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE




200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109

 After Hours Phone: 619-464-6434
License Number: A113241
NPI: 1134144165
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109
 After Hours Phone: 619-464-6434
License Number: A89865

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone: 619-464-6434

License Number: C133872

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

LAKESIDE

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

Fax: 360-462-2744

After Hours Phone: 858-218-3000

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

After Hours Phone: 858-218-3000

License Number: A75411

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

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B. العيادات الصحية المؤهلة فيدراليًا

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

Fax: 360-462-2744

After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A43914

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: www.ihpsocal.org


LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: G78814


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY

LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550


 After Hours Phone:
619-515-2550

License Number: NP95009933

NPI: 1134155377



Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No




 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER





Provider ID: 419139
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: 619-515-2550
 After Hours Phone:
 619-515-2550
 License Number: NP95013978
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N


 Accessibility: CONTACT

PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER





Provider ID: 419139
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: 619-515-2550
 After Hours Phone:
 619-515-2550
 License Number: PA12416
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: 619-515-2550
 After Hours Phone:
 619-515-2550
 License Number: PA56072
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM



American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

DIEGO

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: 619-515-2550

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ *After Hours Phone:*
619-515-2550
License Number: RN428876
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL): N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604
☎ *Phone:* 619-515-2550
Fax: 619-825-9577
☎ *After Hours Phone:*
619-515-2550
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes

Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604
☎ *Phone:* 619-515-2550
Fax: 619-825-9577
☎ *After Hours Phone:*
619-515-2550
License Number: 550001268
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM

SA 9:00AM-5:00PM
American Sign Language (ASL): N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604
☎ *Phone:* 619-515-2550
☎ *After Hours Phone:*
619-515-2550
License Number: A102060
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL): N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A107323

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: N/A


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY

LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550


 After Hours Phone:
619-515-2550

License Number: A113001


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A114181


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



 Site English Spoken: Yes

Cultural Competency: No




 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

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WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER





Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N



 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A





LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER



Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER



Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





B. العيادات الصحية المؤهلة فيدرالياً


 After Hours Phone:
619-515-2550
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A






LEMON GROVE FAMILY HEALTH CENTER


Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A154838
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO




LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A164859
NPI: 1134155377


Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A165925

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: N/A


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA

91945-1604

 Phone: 619-515-2550


 After Hours Phone:
619-515-2550

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550


 After Hours Phone:
619-515-2550


License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER




Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone: 619-515-2550
License Number: C172318
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone: 619-515-2550

License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None






 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

LEMON GROVE FAMILY HEALTH CENTER




Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone: 619-515-2550
License Number: NP15444
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone: 619-515-2550
License Number: NP95001050
NPI: 1134155377

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: NP95008782

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

NATIONAL CITY

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: A176878

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: NP95010663

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: PA55660

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

Fax: 619-269-0053

After Hours Phone:
619-515-2399

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

Fax: 619-269-0053

After Hours Phone:
619-515-2399

License Number: 550000465

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: 20A18460

NPI: 1134155377




Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No





Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SA 8:30AM-3:30PM
American Sign Language (ASL):  Website: www.fhcsd.org
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org





FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 Phone: 619-515-2399
 After Hours Phone:
619-515-2399
License Number: A163862
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN





DIEGO

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: A74777
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM


American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: NP22974
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

91950-7410
☎ Phone: 844-200-2426
🕒 After Hours Phone:
844-200-2426
License Number: NP95000203
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
🕒 Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
🌐 Website: www.operationsa
mahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
📍 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
☎ Phone: 844-200-2426
Fax: 619-474-3919
🕒 After Hours Phone:
844-200-2426
NPI: 1801907449

Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
🕒 Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
🌐 Website: www.operationsa
mahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
📍 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
☎ Phone: 844-200-2426
Fax: 619-474-3919
🕒 After Hours Phone:
844-200-2426
License Number: 90000183
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken:

Tagalog, Lao, Spanish
Cultural Competency: No
🕒 Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
🌐 Website: www.operationsa
mahan.org


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302
📍 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208
☎ Phone: 844-200-2426
🕒 After Hours Phone:
844-200-2426
License Number: NP95000203
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

SA 8:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN

 Website: www.operationsamahan.org


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

Fax: 619-434-8999

 After Hours Phone:
844-200-2426


NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN

 Website: www.operationsamahan.org


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

Fax: 619-434-8999

 After Hours Phone:
844-200-2426

License Number: 550002622


NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN


 Website: www.operationsamahan.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-280-4213

 After Hours Phone:
619-280-4213

License Number: A167184


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: 20A6433

NPI: 1609849074

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-434-7308

After Hours Phone:
619-434-7308

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-434-7308

After Hours Phone:
619-434-7308

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-434-7308

After Hours Phone:
619-434-7308

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC





Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-434-7308
 Fax: 619-434-7310
 After Hours Phone:
619-434-7308
License Number: NP95013257
NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-564-8765
 After Hours Phone:
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA
MAESTRA FAMILY CLINIC


 Website: www.lamaestra.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST

NATIONAL CITY, CA
91950-2312

Phone: 619-662-4100
Fax: 619-259-2807

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-798-3977
After Hours Phone:
619-798-3977

License Number: A41375

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

Phone: 619-662-4100
Fax: 619-259-2807

After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Yes
Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No





Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
 Phone: 619-662-4100
Fax: 619-259-2807
 After Hours Phone: 619-662-4100
License Number: A71304
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH PARADISE HILLS



Provider ID: 227418
 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
 Phone: 619-662-4100
Fax: 619-259-2806
 After Hours Phone: 619-662-4100
License Number: 20A11518
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
 Phone: 619-662-4100
Fax: 619-259-2807
 After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N






 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A146819
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N







 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A157488
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS



























Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A167529
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G88347
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

- N**
 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **Website: www.ihpsocal.org**
- SAN YSIDRO HEALTH PARADISE HILLS**
 Provider ID: 227418
 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
 **Phone: 619-662-4100**
 **After Hours Phone: 619-662-4100**
License Number: A118227
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
 **Site Languages(s) Spoken: Tagalog, Spanish**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM**
American Sign Language (ASL):
- N**
 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **Website: www.ihpsocal.org**
- SAN YSIDRO HEALTH PARADISE HILLS**
 Provider ID: 227418
 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
 **Phone: 619-662-4100**
 **After Hours Phone: 619-662-4100**
License Number: A138534
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
 **Site Languages(s) Spoken: Tagalog, Spanish**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM**
American Sign Language (ASL):
- N**
 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **Website: www.ihpsocal.org**
- SAN YSIDRO HEALTH NATIONAL CITY**
 Provider ID: 227412
 1136 D AVE NATIONAL CITY, CA 91950-3412
 **Phone: 619-662-4100**
Fax: 619-336-2323
 **After Hours Phone: 619-662-4100**
License Number: A112571
NPI: 1598122871
Accepting New Patients: Yes
- N**
 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **Website: www.ihpsocal.org**
- SAN YSIDRO HEALTH NATIONAL CITY**
 Provider ID: 227412
 1136 D AVE NATIONAL CITY, CA 91950-3412
 **Phone: 619-662-4100**
Fax: 619-336-2323
 **After Hours Phone: 619-662-4100**
License Number: A112571
NPI: 1598122871
Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100
Fax: 619-474-3722

After Hours Phone:
619-662-4100

License Number: A55469
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100
Fax: 619-474-3722

After Hours Phone:
619-662-4100

License Number: G46444
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-336-2300

After Hours Phone:
619-336-2300

License Number: A78373
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

91950-3412
Phone: 619-428-4463

After Hours Phone:
619-428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A138919

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A165184

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

OCEANSIDE

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

After Hours Phone:

760-433-3155

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

After Hours Phone:
760-433-3155

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

After Hours Phone:
760-433-3155

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

After Hours Phone:
760-433-3155

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-891-4667

After Hours Phone:
760-891-4667

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

VISTA COMMUNITY CLINIC

HORNE STREET

Provider ID: 402436

517 N HORNE ST
OCEANSIDE, CA
92054-2518

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: 20A17371

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No



Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):




N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: N/A*



VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 *Phone: 760-631-5000*
 *After Hours Phone:
760-631-5000*
License Number: NP95006826
NPI: 1598122871




Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: N/A*



VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 *Phone: 760-631-5000*
 *After Hours Phone:
760-631-5000*
License Number: NP95007885
NPI: 1598122871



Accepting New Patients: Yes
Min/Max Age: 0\None




 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: N/A*

VISTA COMMUNITY CLINIC HORNE STREET





Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 *Phone: 760-631-5000*
Fax: 760-414-3892

 *After Hours Phone:
760-631-5000*
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: N/A*

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 *Phone: 760-631-5000*
Fax: 760-414-3892
 *After Hours Phone:
760-631-5000*
License Number: 80000745
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL): 🗣️ Website: www.ihpsocal.org

N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎️ Phone: 760-757-4566

Fax: 760-757-3004

🕒 After Hours Phone:
760-757-4566

License Number: A66289

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑️ Site English Spoken: Yes

☑️ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎️ Phone: 760-757-4566

Fax: 760-736-8740

🕒 After Hours Phone:
760-757-4566

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑️ Site English Spoken: Yes

☑️ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎️ Phone: 760-757-4566

Fax: 760-736-8740

🕒 After Hours Phone:
760-757-4566

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑️ Site English Spoken: Yes

☑️ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎️ Phone: 760-736-6767

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ *After Hours Phone:*
760-736-6767

License Number: NP95012681
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☐ *Site English Spoken:* Yes
☐ *Site Languages(s) Spoken:*
Spanish

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ *Phone:* 760-736-6767

☎ *After Hours Phone:*
760-736-6767

License Number: NP95013879
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*
Spanish

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ *Phone:* 760-757-4566

☎ *After Hours Phone:*
760-757-4566

License Number: 20A15689

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*
Spanish

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ *Phone:* 760-757-4566

☎ *After Hours Phone:*
760-757-4566

License Number: C152937

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*
Spanish

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: PA22667

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A131678

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


TRUECARE

Provider ID: 296477

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-757-3004

 After Hours Phone:
760-757-4566

License Number: A116562

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None































Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>	<p>SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p> <p>TRUECARE</p> <p>Provider ID: 296479</p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> Phone: 760-757-4566</p> <p> After Hours Phone: 760-757-4566</p> <p>License Number: A64435 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>	<p> Phone: 760-736-6767</p> <p> After Hours Phone: 760-736-6767</p> <p>License Number: 20A7241 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>
<p>TRUECARE</p> <p>Provider ID: 296478</p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> Phone: 760-757-4566</p> <p> After Hours Phone: 760-757-4566</p> <p>License Number: NP21368 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF</p>	<p>TRUECARE</p> <p>Provider ID: 296476</p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p>	<p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 2057-6043</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: NP95003571 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

☎ Phone: 760-631-5000

🕒 After Hours Phone:
760-631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

☎ Phone: 760-631-5000

Fax: 760-414-3731

🕒 After Hours Phone:
760-631-5000

License Number: A130883

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

☎ Phone: 760-631-5000

🕒 After Hours Phone:
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

☎ Phone: 760-631-5000

🕒 After Hours Phone:
760-631-5000

License Number: 20A8949

NPI: 1598122871

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA 2057-6043

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: A149340

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA
92057-6043

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

nityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

Phone: 760-631-5000

Fax: 760-414-3892

After Hours Phone:
760-631-5000

License Number: 80000510

NPI: 1598122871

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: Yes

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

OCEANSIDE, CA
92054-2803

☎ Phone: 760-631-5000
Fax: 760-414-3892

🕒 After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

🗨 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

PAUMA VALLEY

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

☎ Phone: 760-742-9919

🕒 After Hours Phone:
760-742-9919

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

🗨 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 8:00AM-4:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

☎ Phone: 760-742-9919

🕒 After Hours Phone:
760-742-9919

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

🗨 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 8:00AM-4:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

☎ Phone: 760-742-9919

Fax: 858-633-4696

🕒 After Hours Phone:
760-742-9919

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

🗨 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 8:00AM-4:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 Phone: 760-742-9919

Fax: 858-633-4696

 After Hours Phone:
760-742-9919

License Number: 80000611

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org


POWAY

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000


 After Hours Phone:
858-218-3000


License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: PA23310

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: No
 ⌚ Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: N/A**

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

📍 13010 POWAY RD
 POWAY, CA 92064-4520

☎ **Phone: 858-218-3000**

Fax: 360-462-2742

⌚ **After Hours Phone:**
 858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**
Cultural Competency: No

⌚ Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: N/A**

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

📍 13010 POWAY RD
 POWAY, CA 92064-4520

☎ **Phone: 858-218-3000**

Fax: 360-462-2742

⌚ **After Hours Phone:**
 858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**
Cultural Competency: No

⌚ Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: N/A**

SAN DIEGO

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

☎ **Phone: 619-515-2545**

⌚ **After Hours Phone:**
 619-515-2545

License Number: 20A17657

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**
Cultural Competency: No

⌚ Hours: SU 8:00AM-9:00PM
 MO 8:00AM-9:00PM
 TU 8:00AM-9:00PM
 WE 8:00AM-9:00PM
 TH 8:00AM-9:00PM
 FR 8:00AM-9:00PM
 SA 8:00AM-9:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

DIEGO

🌐 **Website: www.fhcsd.org**

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

☎ **Phone: 619-515-2545**

⌚ **After Hours Phone:**

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

619-515-2545
License Number: 20A17702
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
License Number: 20A17926
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
License Number: 20A19399
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
License Number: A100333
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

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B. العيادات الصحية المؤهلة فيدراليًا

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A109633

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A119631

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A140324

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95005321


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95007000


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN


DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: NP95009292


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN


DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95021154


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM


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B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA20378

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:

619-515-2560

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD

HILLCREST

Provider ID: 417937

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:

619-515-2545

License Number: 20A11612

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD

HILLCREST

Provider ID: 417937

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:

619-515-2545

License Number: 20A12504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

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PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN


DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95002226

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:
619-515-2424

License Number: NP95006792

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA17220

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: PA18746

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

Fax: 619-501-0627

After Hours Phone:
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: MT2061555

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP10146


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO CITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: NP95010814


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: PA22762

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

Fax: 619-501-5814

 After Hours Phone:
619-515-2525

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

Fax: 619-501-5814

 After Hours Phone:
619-515-2525

License Number: 550002865

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2400

 After Hours Phone:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

619-515-2400
License Number: 20A17836
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

📍 4094 4TH AVE
SAN DIEGO, CA 92103-2143

☎ Phone: 619-515-2545

🕒 After Hours Phone:
619-515-2545

License Number: A154708

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

☎ Phone: 619-255-9154

🕒 After Hours Phone:
619-255-9154

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

☎ Phone: 619-255-9154

🕒 After Hours Phone:
619-255-9154

License Number: A163693

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: A111170

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: A75533

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: A82639

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: 619-255-9155
After Hours Phone: 619-255-9155

License Number: DC28966
NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: 619-255-9155
After Hours Phone: 619-255-9155

License Number: G45632
NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: 619-255-9155
After Hours Phone: 619-255-9155

License Number: G87837
NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560

License Number: PA58081
NPI: 1134155377


Accepting New Patients: Yes
Min/Max Age: 0\None


Site English Spoken: Yes
Cultural Competency: No
Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone: 619-515-2560
 License Number: PA58505
 NPI: 1134155377

Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone: 619-515-2560
 License Number: PA60864
 NPI: 1134155377

Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560

 After Hours Phone: 619-515-2560
 License Number: RN810863
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 Fax: 619-263-2499
 After Hours Phone: 619-515-2560
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

📍 4725 MARKET ST
SAN DIEGO, CA 92102-4715

☎ Phone: 619-515-2560

Fax: 619-263-2499

🕒 After Hours Phone: 619-515-2560

License Number: A100391

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

📍 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

☎ Phone: 619-515-2430

🕒 After Hours Phone: 619-515-2430

License Number: 20A7147

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

📍 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

☎ Phone: 619-515-2430

🕒 After Hours Phone: 619-515-2430

License Number: PA58826

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

📍 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

☎ Phone: 619-515-2430

Fax: 619-578-2410

🕒 After Hours Phone:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



B. العيادات الصحية المؤهلة فيدراليًا

619-515-2430
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None






 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST


Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
License Number: A169207
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM
American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
License Number: A171135
NPI: 1134155377


Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM




American Sign Language (ASL):

N



 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST



Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
License Number: A177462
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A70175

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A80153

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: A80461

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):


N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: C52451

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: DC31024

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545


License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155


License Number: NP95013257

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone: 619-255-9155


License Number: PA13694

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone: 619-255-9155

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC

 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-284-4731

 After Hours Phone: 619-255-9155


License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-749-5480

 After Hours Phone: 619-255-9155

License Number: A81682

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-280-7072

After Hours Phone:
619-280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-564-8765

After Hours Phone:
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-798-3947

After Hours Phone:
619-798-3947

License Number: DC32800

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

10737 CAMINO RUIZ STE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
After Hours Phone:
844-200-2426

License Number: A161105

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 8:00AM-4:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsa
mahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: C54941

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 8:00AM-4:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsa
mahan.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: 619-515-2430

Fax: 619-578-2410

After Hours Phone:
619-515-2430

License Number: 550002251

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE
SAN DIEGO, CA
92105-2026

Phone: 619-515-2426

After Hours Phone:
619-515-2426

License Number: 20A17577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes



Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM






American Sign Language (ASL):
N



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*

FAMILY HEALTH CTR IBARRA



Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA
92105-2026
 *Phone: 619-515-2426*
 *After Hours Phone: 619-515-2426*
License Number: 20A19345
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*




FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA
92105-2026
 *Phone: 619-515-2426*
 *After Hours Phone: 619-515-2426*
License Number: A145023
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*



FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA
92105-2026
 *Phone: 619-515-2426*
 *After Hours Phone: 619-515-2426*
License Number: A173486


NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*

FAMILY HEALTH CTR IBARRA


Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA
92105-2026
 *Phone: 619-515-2426*
 *After Hours Phone: 619-515-2426*
License Number: G149974
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA
92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: NP17838

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA
92105-2026

 Phone: 619-515-2426


 After Hours Phone:
619-515-2426

License Number: NP95004443

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org


FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA

92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: PA21385

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA
92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: PA58098

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

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B. العيادات الصحية المؤهلة فيدرالياً

Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL): Website: www.fhcsd.org
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

Fax: 619-501-9645

🕒 After Hours Phone:
619-515-2545

License Number: 550003099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL): Website: www.fhcsd.org
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

Fax: 619-501-9645

🕒 After Hours Phone:
619-515-2545

License Number: A95356

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA
92129-2889

Phone: 844-200-2426

🕒 After Hours Phone:
844-200-2426

License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsamahan.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A162332

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: C54198

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: DC33300

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100


Fax: 619-595-0258

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-858-1003

 After Hours Phone:
619-662-4100


License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422


License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422


 After Hours Phone:
619-515-2422

License Number: A122238

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT28061

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: PT292351

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545


License Number: PT292613

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT296559

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: PT40975
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

Fax: 619-501-9645

After Hours Phone:
619-515-2545

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A112379

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A120447

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN DIEGO, CA 92113-1432
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: A120576
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: A153414
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: A157505
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone:
619-515-2545
License Number: PT12930
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: PT25155

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: G16236

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: G80316

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: NP18098

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP7374

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545


License Number: NP95001899

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: NP95005293

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: PA21385

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545

License Number: PA23231

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA
92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: PA58905

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE

SAN DIEGO, CA

92105-2026

Phone: 619-515-2426

After Hours Phone:

619-515-2426

License Number: PA59481

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR OF

SDELM ST

Provider ID: 419167

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: 619-515-2520

Fax: 619-231-0431

After Hours Phone:

619-515-2520

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR OF

SDELM ST

Provider ID: 419167

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: 619-515-2520

Fax: 619-231-0431

After Hours Phone:

619-515-2520

License Number: 550002061

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

Phone: 619-515-2454

After Hours Phone:
619-515-2454

License Number: 20A12796

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

Phone: 619-515-2454

After Hours Phone:
619-515-2454

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

Phone: 619-515-2454

After Hours Phone:
619-515-2454

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

Phone: 619-515-2454

After Hours Phone:
619-515-2454

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:
619-515-2454


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM


SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:
619-515-2454

License Number: 550003556


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426


 After Hours Phone:
844-200-2426


License Number: DC15775

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 8:00AM-4:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN


 Website: www.operationsamahan.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP95003211

NPI: 1801907449

Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Min/Max Age: 0\None

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-4:30PM
- MO 8:00AM-4:30PM
- TU 8:00AM-4:30PM
- WE 8:00AM-4:30PM
- TH 8:00AM-4:30PM
- FR 8:00AM-4:30PM
- SA 8:00AM-4:30PM

American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

- Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

- 10737 CAMINO RUIZ STE 235
- SAN DIEGO, CA 92126-2375
- Phone: 844-200-2426
- Fax: 858-578-4417

- After Hours Phone: 844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 8:00AM-4:30PM

American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

- Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

- 10737 CAMINO RUIZ STE 235
- SAN DIEGO, CA 92126-2375
- Phone: 844-200-2426
- Fax: 858-578-4417

- After Hours Phone: 844-200-2426

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-4:30PM
- MO 8:00AM-4:30PM
- TU 8:00AM-4:30PM
- WE 8:00AM-4:30PM
- TH 8:00AM-4:30PM
- FR 8:00AM-4:30PM

SA 8:00AM-4:30PM

American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

- Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

- 9855 ERMA RD STE 105
- SAN DIEGO, CA 92131-1007
- Phone: 844-200-2426

- After Hours Phone: 844-200-2426

License Number: NP95010585

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-4:30PM
- MO 8:00AM-4:30PM
- TU 8:00AM-4:30PM
- WE 8:00AM-4:30PM
- TH 8:00AM-4:30PM
- FR 8:00AM-4:30PM
- SA 8:00AM-4:30PM

American Sign Language (ASL): N


- Accessibility: CONTACT PROVIDER

Medical Group/IPA:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


OPERATION SAMAHAN


 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426


License Number: A71544

NPI: 1801907449

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN


 Website: www.operationsamahan.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


 Website: www.operationsamahan.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

 Fax: 858-536-8034


 After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


 Website: www.operationsamahan.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

 Fax: 858-536-8034


 After Hours Phone:
844-200-2426


License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes



Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No





 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
 Website: www.operationsamahan.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone: 619-515-2435
License Number: A80504
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO



 Website: N/A
SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone: 619-515-2435

License Number: A97036
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435

 After Hours Phone: 619-515-2435
License Number: NP95011254
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone: 619-515-2435

License Number: PA16245
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website: N/A*

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

📍 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

☎ *Phone: 619-515-2435*

Fax: 619-515-2435

🕒 *After Hours Phone: 619-515-2435*

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 *Site English Spoken: yes
Cultural Competency: No*

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website: N/A*

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

📍 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

☎ *Phone: 619-515-2435*

🕒 *After Hours Phone: 619-515-2435*

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 *Site English Spoken: yes
Cultural Competency: No*

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website: N/A*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

☎ *Phone: 619-515-2300*

🕒 *After Hours Phone: 619-515-2300*

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 *Site English Spoken: Yes
Cultural Competency: No*

🕒 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website: www.fhcsd.org*

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

📍 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195

☎ *Phone: 619-515-2422*


🕒 *After Hours Phone:*



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


619-515-2422
License Number: NP95011254
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
⌚ Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: www.fhcsd.org
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone: 619-515-2422
License Number: PA20888
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No

⌚ Hours: SU 8:00AM-5:00PM N
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: www.fhcsd.org
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone: 619-515-2422

License Number: PA53788
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
⌚ Hours: SU 8:00AM-5:00PM N
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: www.fhcsd.org

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
Fax: 619-269-0053
 After Hours Phone: 619-515-2422
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
⌚ Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195

Phone: 619-515-2422

Fax: 619-269-0053

After Hours Phone:
619-515-2422

License Number: 550003113

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A162946

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

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- N**
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*
- FAMILY HLTH CTR SAN DIEGO-BEACH AREA**
 Provider ID: 402851
 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
 License Number: 20A14919
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM*
 American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*
- OPERATION SAMAHAN RANCHO PENASQUITOS**
 Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
 *After Hours Phone: 844-200-2426*
 License Number: DC29074
 NPI: 1801907449
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM*
 American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: OPERATION SAMAHAN
 *Website: www.operationsamahan.org*
- OPERATION SAMAHAN RANCHO PENASQUITOS**
 Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
 *After Hours Phone:*
- RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
 *After Hours Phone: 844-200-2426*
 License Number: NP22974
 NPI: 1801907449
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM*
 American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: OPERATION SAMAHAN
 *Website: www.operationsamahan.org*
- OPERATION SAMAHAN RANCHO PENASQUITOS**
 Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
 *After Hours Phone:*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

844-200-2426

License Number: NP95003211

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone: 844-200-2426

License Number: PA19664

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

Fax: 858-695-9074

After Hours Phone: 844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

Fax: 858-695-9074

After Hours Phone: 844-200-2426

License Number: 550002478

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM





TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN
 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 Fax: 858-695-9074
 After Hours Phone: 844-200-2426
 License Number: 550003857
 NPI: 1801907449
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM
 American Sign Language (ASL):





N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN
 Website: www.operationsamahan.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
 License Number: A154298
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
 License Number: A118095
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A140646

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:

619-515-2424

License Number: A147758

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:

619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO CITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:

619-515-2525

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:
619-515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:
619-515-2525

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: 20A20252

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN


DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560


License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A140912

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560


License Number: A161373

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560


License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO CITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:
619-515-2525

License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: 20A15471

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

Accessibility: CONTACT

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PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A113448


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560


License Number: A115598

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS



Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: 20A14794


NPI: 1134155377


Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS



Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS


Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424


License Number: 20A15068

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: PA21042

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

Fax: 619-683-7586

After Hours Phone:
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

Fax: 619-683-7586

After Hours Phone:
619-515-2424

License Number: 90000469

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:
619-515-2424

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


License Number: A51318
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS



Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS



Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A132576


NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-263-2499

After Hours Phone:
619-263-2499

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2420

After Hours Phone:
619-515-2420

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2420

After Hours Phone:
619-515-2420

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A154298


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560


License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT


PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100


Fax: 619-662-4158

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: NP8563

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A126181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 Fax: 619-515-2510

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ *After Hours Phone:*
619-515-2300
License Number: A178494
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

🗉 *Site English Spoken: Yes*
Cultural Competency: No
🕒 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
♿ *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
📍 3514 30TH ST
SAN DIEGO, CA 92104-4120
☎ *Phone: 619-515-2424*
☎ *After Hours Phone: 619-515-2424*
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
🗉 *Site English Spoken: Yes*
Cultural Competency: No

🕒 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
♿ *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
📍 3514 30TH ST
SAN DIEGO, CA 92104-4120
☎ *Phone: 619-515-2424*
☎ *After Hours Phone: 619-515-2424*
License Number: 20A14919
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None
🗉 *Site English Spoken: Yes*
Cultural Competency: No
🕒 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
📍 3514 30TH ST
SAN DIEGO, CA 92104-4120
☎ *Phone: 619-515-2424*
☎ *After Hours Phone: 619-515-2424*
License Number: A103099
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None
🗉 *Site English Spoken: Yes*
Cultural Competency: No
🕒 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
♿ *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website: www.fhcsd.org*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A71671

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:
619-515-2444

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:
619-515-2444

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:
619-515-2444

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: A154298


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN


DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:

619-515-2444

License Number: A154399


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:

619-515-2444

License Number: A163464


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:

619-515-2444

License Number: A164859


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-428-4463

After Hours Phone:
619-428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A7435

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A8204

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA17864

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA21591


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 Phone: 619-429-3733

Fax: 619-628-5550

 After Hours Phone:
619-429-3733


License Number: 550001474

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No






 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا



FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ibclinic.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PA23258
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO




 Website: www.fhcsd.org
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PA53788
NPI: 1134155377


Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300





 After Hours Phone: 619-515-2300
License Number: PA54661
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PA61677
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

☎ Phone: 619-515-2300

🕒 After Hours Phone:
619-515-2300

License Number: PT295463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

☎ Phone: 619-515-2300

🕒 After Hours Phone:
619-515-2300

License Number: PT30272

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

☎ Phone: 619-515-2300

🕒 After Hours Phone:
619-515-2300

License Number: PT33914

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

☎ Phone: 619-515-2300

🕒 After Hours Phone:
619-515-2300

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: RN486421

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A101017

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes N

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: A153223

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: 619-662-4100
After Hours Phone:
619-662-4100

License Number: A165432

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A45942

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A79383

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A96919

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: DC27523

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP15657

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:

619-515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM






American Sign Language (ASL):

N



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*




LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP95022452
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*


LOGAN HEIGHTS FAMILY HEALTH CENTER


Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: PA13752
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None




 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO



 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER




Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*

License Number: PA15227
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 9:00AM-5:00PM*
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
Fax: 858-488-1394
 *After Hours Phone: 619-515-2444*
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None


 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:30AM-5:30PM*
MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

Fax: 858-488-1394

 After Hours Phone:
619-515-2444

License Number: 80000115

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-238-5551

 After Hours Phone:
619-238-5551

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A156607

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP20849

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً .B

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

316 25TH ST
SAN DIEGO, CA 92102-3016

Phone: 619-662-4100

Fax: 619-238-3807

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: 20A12653

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

DIEGO



Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360



1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: 20A12732
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: 20A14919
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM






American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: 20A15743
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: 20A17072
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: 20A17478

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A77126


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A93385


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A95577


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: DPM5661
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER



Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER



Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300


License Number: G81658

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT




PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER



Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A169752

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A177373

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A46161


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A61687

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300


License Number: A68124

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

 2630 1ST AVE
SAN DIEGO, CA
92103-6599
 Phone: 619-234-2158
Fax: 619-234-0206

 After Hours Phone:
619-234-2158

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Korean, Spanish, Hindi
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdaihc.org


SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

 2630 1ST AVE
SAN DIEGO, CA
92103-6599

 Phone: 619-234-2158

Fax: 619-234-0206

 After Hours Phone:
619-234-2158

License Number: 90000168

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Korean, Spanish, Hindi

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdaihc.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا




 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: A144372
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: C174985





NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: DPM4434
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:

Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR


Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: G41532
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: G44807

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-279-0377

 After Hours Phone:
858-279-0925

License Number: A93812

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM


FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-279-0377

 After Hours Phone:
858-279-0925

License Number: G70886

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM


FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

Fax: 858-633-4680

After Hours Phone:
858-279-0925

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Phone: 858-810-8700

After Hours Phone:
858-810-8700

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE
SAN DIEGO, CA 92105-1524

Phone: 619-563-0250

After Hours Phone:
619-563-0250

License Number: 20A7662

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE
SAN DIEGO, CA 92105-1524

Phone: 619-563-0250

After Hours Phone:
619-563-0250

License Number: A112176

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

- N**
 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **Website: www.sdfamilycare.org**
- MID-CITY COMMUNITY CLINIC**
Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 **Phone: 619-563-0250**
 **After Hours Phone: 619-563-0250**
License Number: A163512
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM**
American Sign Language (ASL):
N
- MID-CITY COMMUNITY CLINIC**
Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 **Phone: 619-563-0250**
 **After Hours Phone: 619-563-0250**
License Number: A175116
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM**
American Sign Language (ASL):
N
- MID-CITY COMMUNITY CLINIC**
Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 **Phone: 619-563-0250**
 **After Hours Phone: 619-563-0250**
License Number: G60630
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM**
American Sign Language (ASL):
N
- MID-CITY COMMUNITY CLINIC**
Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 **Phone: 619-563-0250**
 **After Hours Phone: 619-563-0250**
License Number: DPM4434
NPI: 1598122871
- MID-CITY COMMUNITY CLINIC**
Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 **Phone: 619-563-0250**
 **After Hours Phone: 619-563-0250**
License Number: G60630
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM**
American Sign Language (ASL):
N
- MID-CITY COMMUNITY CLINIC**
Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 **Phone: 619-563-0250**
 **After Hours Phone: 619-563-0250**
License Number: G60630
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM**
American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org






MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone: 619-280-2058
License Number: A112176
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org




.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone: 619-280-2058
License Number: A152267
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM






American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:

619-280-2058
License Number: A163512
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC


Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone: 619-280-2058
License Number: A61238
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


العيادات الصحية المؤهلة فيدرالياً

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone: 619-280-2058

License Number: A72833


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone: 619-280-2058

License Number: A94449


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone: 619-515-2444

License Number: A108228


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO


 Website: www.fhcsd.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone: 619-280-2058

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: NP95019446
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None


Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: 20A12402
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A119010
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese


Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700


 After Hours Phone:
858-810-8700

License Number: A137415
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700


License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700


License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700


 After Hours Phone:
858-810-8700


License Number: A92173

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700


 After Hours Phone:
858-810-8700


License Number: A94449

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700


License Number: C174985

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM


SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A146838


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A136616


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A142703

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: A146111

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A120043

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N






Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A7502
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 550003882
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone:

619-662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A147939
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A151631

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A160489

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A163978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A164889

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154-1351

Phone: 619-429-3733

After Hours Phone:
619-429-3733

License Number: A112781

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ibclinic.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154-1351

Phone: 619-429-3733

After Hours Phone:
619-429-3733

License Number: A165398

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


























Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ibclinic.org</i></p>	<p>NESTOR COMMUNITY HEALTH CENTER</p> <p><i>Provider ID: 214492</i></p> <p> 1016 OUTER RD SAN DIEGO, CA 92154-1351</p> <p> <i>Phone: 619-429-3733</i></p> <p> <i>Fax: 619-628-5550</i></p> <p> <i>After Hours Phone: 619-429-3733</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:30AM-5:00PM MO 8:30AM-5:00PM TU 8:30AM-5:00PM WE 8:30AM-5:00PM TH 8:30AM-5:00PM FR 8:30AM-5:00PM SA 8:30AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ibclinic.org</i></p>	<p><i>619-515-2300</i></p> <p><i>License Number: NP95003689</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> <i>Website: www.fhcsd.org</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ibclinic.org</i></p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone:</i></p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: NP95007253</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 9:00AM-5:00PM</i></p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NP2286

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NP95000602

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:

619-515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:

619-515-2444

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:

619-515-2444

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: C53623

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: DC20729

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: NM1662

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN


DIEGO


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:
619-515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP10906

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP11778

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP17852

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: PA54617


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: G41532

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare .org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: G70886

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM


TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.sdfamilycare .org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: NP16433

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare .org

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SAN DIEGO FAMILY CARE

Provider ID: 482070

7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Phone: 858-810-8700

After Hours Phone:
858-810-8700

License Number: NP23847

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.sdfamilycare.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A104052

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A109828

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A42127

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A54702

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A60801

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone:
619-233-8500
License Number: A67762
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone:
619-233-8500
License Number: A82123
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone:
619-233-8500
License Number: C53121
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone:
619-233-8500
License Number: G29879
NPI: 1598122871



Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: 619-233-8500*
 *After Hours Phone: 619-233-8500*

License Number: G71080

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 *Phone: 619-233-8500*

 *After Hours Phone: 619-233-8500*

License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 *Phone: 619-233-8500*

 *After Hours Phone: 619-233-8500*

License Number: NP10769

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *Website: N/A*

SAN MARCOS


TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 *Phone: 760-736-6767*

Fax: 760-736-8740

 *After Hours Phone: 760-736-6767*


License Number: 80000167

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Yes*



 *Site Language(s) Spoken: Spanish*

Cultural Competency: No






 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM


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B. العيادات الصحية المؤهلة فيدراليًا

WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: G74757
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA



 Website: www.ihpsocal.org



TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:

760-520-8200
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: 1598122871
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95001653

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95002545

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95003903

NPI: 1598122871

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: PA17101

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: PA51867

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:
760-736-6767

License Number: NP18788

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:
760-736-6767

License Number: PA17718

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

Fax: 760-736-8740

After Hours Phone:
760-736-6767

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP20893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes





























Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM































اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Website: www.ihpsocal.org Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A93248 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 After Hours Phone: 760-736-6767 License Number: C54157 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A71311 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: DC29074 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

<p> Site Languages(s) Spoken: Spanish</p>	<p>FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p> Website: www.ihpsocal.org</p>
<p>Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: NM235997 NPI: 1598122871</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish</p>
<p>TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: G71182 NPI: 1598122871</p>	<p>License Number: NM235844 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish</p>	<p>Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish</p>	<p>Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p>Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p>	<p>TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ After Hours Phone:
760-736-6767

License Number: NP18874
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes
☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

📍 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

☎ Phone: 760-736-6767

☎ After Hours Phone:
760-736-6767

License Number: A63903

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

📍 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

☎ Phone: 760-736-6767

☎ After Hours Phone:
760-736-6767

License Number: 20A15159

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

📍 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

☎ Phone: 760-736-6767

☎ After Hours Phone:
760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: A48980

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: A60958

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

Fax: 619-600-4870

 After Hours Phone:
619-662-4100


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No






 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM



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B. العيادات الصحية المؤهلة فيدراليًا




FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PA58672
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT302385
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP95017732
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA



 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100



License Number: NP95019995
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org



SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: NP95004315
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF




SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: NP95003721
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100

 After Hours Phone: 619-662-4100
License Number: A51843
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: C42207
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: G66745

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100


License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95001960

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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B. العيادات الصحية المؤهلة فيدراليًا

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: NP95003671

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A32571

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: www.ihpsocal.org**

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

📍 **3364 BEYER BLVD**
SAN YSIDRO, CA 92173-1322

☎ **Phone: 619-662-4100**

🕒 **After Hours Phone:**
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**

Cultural Competency: No

🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: www.ihpsocal.org**

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

📍 **3364 BEYER BLVD**
SAN YSIDRO, CA 92173-1322

☎ **Phone: 619-662-4100**

🕒 **After Hours Phone:**
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**

Cultural Competency: No

🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: www.ihpsocal.org**

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

📍 **3364 BEYER BLVD**
SAN YSIDRO, CA 92173-1322

☎ **Phone: 619-662-4100**

🕒 **After Hours Phone:**
619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**

Cultural Competency: No

🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **Website: www.ihpsocal.org**

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

📍 **3364 BEYER BLVD**
SAN YSIDRO, CA 92173-1322

☎ **Phone: 619-662-4100**

🕒 **After Hours Phone:**
619-662-4100

License Number: A153975

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: 619-600-4870
 After Hours Phone: 619-600-4870

License Number: NP95018617

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: 619-662-4100

Fax: 619-205-6341

After Hours Phone: 619-662-4100

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

SAN YSIDRO, CA
92173-2007
☎ Phone: 619-662-4100
Fax: 619-205-6341
🕒 After Hours Phone:
619-662-4100
License Number: A164201
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
📍 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
☎ Phone: 619-662-4100
Fax: 619-205-6341
🕒 After Hours Phone:

619-662-4100
License Number: A55469
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
📍 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
☎ Phone: 619-662-4100
Fax: 619-205-6341
🕒 After Hours Phone:
619-662-4100
License Number: A78373
NPI: 1598122871
Accepting New Patients: Yes



Min/Max Age: 0\None
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS



Provider ID: 227469
📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
☎ Phone: 619-600-4867
🕒 After Hours Phone:
619-600-4867
License Number: PA22855
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
☐ Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A93785
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese




Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A99433
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


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

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: C42207
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA



 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C51110
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC33693
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G51462
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A80832

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM


TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A84160

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G59670

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G80107
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G81461
NPI: 1598122871






Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-6305
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-6341
 After Hours Phone:
619-662-4100
License Number: DPM2930
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): SOUTHERN CALIFORNIA
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP12112

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM


TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL): SOUTHERN CALIFORNIA

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95003355

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA17162

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org






SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A125329
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A127188
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A130348
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A131021

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM


WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A131952

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A132982

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A145480
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138568
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A145008
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A180886
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A170738

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM


WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A173435

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A175006

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org





SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A177337
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A157505
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A158364
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A159673
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A169694

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A72235

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A40480
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A49267
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A49307
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A56153
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):  Website: www.ihpsocal.org
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A63844

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL): 


N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A66885

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL): 

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A71304

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL): 

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292



 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A8081
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A9907
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A101017
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A101827
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):  N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A104660

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  N

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A106103

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  N

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A113482

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  N

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A114008
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A114893
NPI: 1598122871







Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-205-6341
 After Hours Phone:
619-205-6341
License Number: A64487
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-428-4463
 After Hours Phone:
619-428-4463
License Number: 20A8245
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):  Website: www.ihpsocal.org


N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-428-4463

 After Hours Phone:
619-428-4463

License Number: A112627

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM


TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL): 


N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A10964

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A11153

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292



 4004 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A12653
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A17643
NPI: 1598122871


Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A7502
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR




Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-1948
 After Hours Phone:
619-662-4100
License Number: A63844
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SA 8:30AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org






SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A12555
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A14949
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM



American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR



Provider ID: 227411
 4050 BEYER BLVD

SAN YSIDRO, CA
92173-2007




 Phone: 619-662-4100
 After Hours Phone: 619-662-4100

License Number: 20A8516
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A111118
NPI: 1598122871

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A113914

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A138938

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: C160626

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: G52183

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

Fax: 619-205-1948

After Hours Phone:
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

Fax: 619-205-1948

After Hours Phone:
619-662-4100

License Number: A72721

NPI: 1598122871

Accepting New Patients: Yes



Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No





Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N






 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-1948
 After Hours Phone: 619-662-4100
License Number: A82187
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N






 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-1948
 After Hours Phone: 619-662-4100
License Number: G20087
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-1948
 After Hours Phone: 619-662-4100
License Number: G51462
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

92173-2007
☎ Phone: 619-662-4100
Fax: 619-205-6305
🕒 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
🗣 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
📍 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
☎ Phone: 619-662-4100
🕒 After Hours Phone:
619-662-4100
License Number: C149818
NPI: 1598122871
Accepting New Patients: Yes

Min/Max Age: 0\None
🗣 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
📍 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
☎ Phone: 619-662-4100
🕒 After Hours Phone:
619-662-4100
License Number: C158543
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
🗣 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM

FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
📍 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
☎ Phone: 619-662-4100
🕒 After Hours Phone:
619-662-4100
License Number: A157505
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
🗣 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A169577

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A175006

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A178949

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A74960

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A94813

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100


License Number: 20A14222

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SPRING VALLE

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ Phone: 619-515-2555
 ⌚ After Hours Phone:
 619-515-2555
 License Number: A76059
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None

📄 Site English Spoken: Yes
 Cultural Competency: No
 ⌚ Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 📍 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 ☎ Phone: 619-515-2555
 ⌚ After Hours Phone:
 619-515-2555
 License Number: G78814
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None

📄 Site English Spoken: Yes
 Cultural Competency: No
 ⌚ Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 📍 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 ☎ Phone: 619-515-2555
 ⌚ After Hours Phone:
 619-515-2555

License Number: NP10943
 NPI: 1134155377

Accepting New Patients: Yes
 Min/Max Age: 0\None

📄 Site English Spoken: Yes
 Cultural Competency: No
 ⌚ Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM

SA 9:00AM-5:00PM
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

📍 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035

☎ Phone: 619-515-2555
 ⌚ After Hours Phone:
 619-515-2555

License Number: NP95013978
 NPI: 1134155377

Accepting New Patients: Yes
 Min/Max Age: 0\None

📄 Site English Spoken: Yes
 Cultural Competency: No
 ⌚ Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


العيادات الصحية المؤهلة فيدراليًا


DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: PA54588

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC


Provider ID: 206361

 8788 JAMACHA RD

SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

Fax: 619-462-5584

 After Hours Phone:
619-515-2555

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A149063


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A154298


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes



Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT





PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A169342
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ *After Hours Phone:*
619-515-2555
License Number: A178499
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL): N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
📍 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
☎ *Phone:* 619-515-2555
☎ *After Hours Phone:*
619-515-2555
License Number: A55932
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes

Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
📍 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
☎ *Phone:* 619-515-2555
☎ *After Hours Phone:*
619-515-2555
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website:* www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC


Provider ID: 206361
📍 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
☎ *Phone:* 619-515-2555
☎ *After Hours Phone:*
619-515-2555
License Number: A148014
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL): N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org


GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA

91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555


 After Hours Phone:
619-515-2555


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555


License Number: 20A14919

NPI: 1134155377


Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):  N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: 20A15459


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A108228


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM


FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A113001


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org


SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL): Website: www.fhcsd.org

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

VISTA

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: 20A8949

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: www.vistacommu
nityclinic.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: A125026

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: A173511

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: A56214

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: A62780

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No


Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: A80635

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org


nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: C143703

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.vistacommunityclinic.org

760-631-5000

License Number: C162072

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: C171929

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Spanish
Cultural Competency: No
🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR VISTA, CA 92084-5218

☎ Phone: 760-414-3892

🕒 After Hours Phone: 760-414-3892

License Number: DC31392

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM

SA 8:00AM-8:00PM
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR VISTA, CA 92084-5218

☎ Phone: 760-414-3892

🕒 After Hours Phone: 760-414-3892

License Number: NP23217

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR VISTA, CA 92084-5218

☎ Phone: 760-414-3892

🕒 After Hours Phone: 760-414-3892

License Number: NP95003087

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR VISTA, CA 92084-5218

☎ Phone: 760-414-3892

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Fax: 760-414-3892

☎ After Hours Phone:
760-414-3892

License Number: 20A9149

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: 20A13745

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


SOUTHERN CALIFORNIA

 Website: www.vistacommunityclinic.org


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 Phone: 844-308-5003

Fax: 760-414-3892

 After Hours Phone:
844-308-5003

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 Phone: 844-308-5003

Fax: 760-414-3892

 After Hours Phone:
844-308-5003

License Number: 1851300123

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 Phone: 844-308-5003

Fax: 760-414-3892

 After Hours Phone:
844-308-5003


License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A


VISTA COMMUNITY CLINIC

GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000


License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

Fax: 760-414-3892

After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
135 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: 760-631-5000
After Hours Phone:
760-631-5000
License Number: A60517
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
136 GRAPEVINE RD

VISTA, CA 92083-4004
Phone: 760-631-5000
Fax: 760-414-3892
After Hours Phone:
760-631-5000
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: Yes
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 844-308-5003
After Hours Phone:
844-308-5003
License Number: PA20775
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish
Cultural Competency: No
Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone:
760-631-5000
License Number: PA19629
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No
Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 844-308-5003

 After Hours Phone: 844-308-5003

License Number: NP11448

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: NP95009284

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: NP95016368

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM


SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: C52564

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone: 760-631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone: 760-631-5000

License Number: DPM3999

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone: 760-631-5000

License Number: G51286

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR VISTA, CA 92084-5218

Phone: 760-631-5000

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

☎ After Hours Phone:
760-631-5000

License Number: G79676
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes
☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: G86902
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: NP10896
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: NP95003571
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

☑ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000


License Number: NP95009149

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Language(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.vistacommunityclinic.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802


Provider Gender: Male


License Number: NP95006360


NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female


License Number: NP23004


NPI: 1760765333


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female


License Number: NP95005999


NPI: 1316478092


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male


License Number: DC28335


NPI: 1619040292

Provider English Spoken: Y
 Provider Language(s)
Spoken: Burmese, Gujarati,
Hindi, Urdu

Cultural Competency: N


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Male
 License Number: DC22733
 NPI: 1174656755
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.mtnhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

BAUTISTA, LUIS
 Provider ID: 517802
 Provider Gender: Male
 License Number: A97270
 NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 COMMUNITY REGIONAL
 MEDICAL CENTER-FRESNO,
 ST AGNES MEDICAL CENTER
 Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.mtnhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

DUBE, BIANCA
 Provider ID: 517802
 Provider Gender: Female
 License Number: C172036
 NPI: 1740535152
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE
 Provider ID: 517802
 Provider Gender: Female
 License Number: A88893
 NPI: 1164508073
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.mtnhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL
 Provider ID: 517802

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Female

License Number: A177337

NPI: 1497217756

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE,

Provider ID: 517802

NPI: 1770124315

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 320-3347

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

STENSMAN, LARS

Provider ID: 595793

Provider Gender: Male

NPI: 1659638062

Provider English Spoken: Y

Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish

Cultural Competency: N

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

STENSMAN, LARS

Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☐ *Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1620 ALPINE BLVD STE 110 ALPINE, CA 91901

☎ *Phone: (619) 662-4100*

🕒 *After Hours Phone: (619) 662-4100*

🌐 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 517802

Provider Gender: Male

License Number: PA52347

NPI: 1376936120

☐ *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1620 ALPINE BLVD STE 110 ALPINE, CA 91901

☎ *Phone: (619) 662-4100*

🕒 *After Hours Phone: (619) 662-4100*

🌐 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517802

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

☐ *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1620 ALPINE BLVD STE 110 ALPINE, CA 91901

☎ *Phone: (619) 662-4100*

🕒 *After Hours Phone: (619) 662-4100*

🌐 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

CAMPO

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 519686

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

☐ *Provider English Spoken: Y*

☐ *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906

☎ *Phone: (619) 662-4100*

🕒 *After Hours Phone: (619) 662-4100*

🌐 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

BAUM, PETER

Provider ID: 549082

Provider Gender: Male

NPI: 1174919971

☐ *Provider English Spoken: Y*

☐ *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906

☎ *Phone: (619) 662-4100*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Fax: (619) 824-9071

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

FAMILY PRACTICE

BAUM, PETER

Provider ID: 519686

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

Provider ID: 519686

Provider Gender: Female

License Number: A112627

NPI: 1710147566

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 519686

Provider Gender: Female

License Number: A88893

NPI: 1164508073

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906

☎ Phone: (619) 445-6200

☎ After Hours Phone: (619) 445-6200

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MCINTYRE, RYAN

Provider ID: 519686

Provider Gender: Male

License Number: A133029

NPI: 1164776555

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,



GROSSMONT HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS RD

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CAMPO, CA 91906
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



ORTIZ, KENNETH


Provider ID: 519686
 Provider Gender: Male
 License Number: A156607
 NPI: 1356761571

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100



 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROGERS, MATTHEW


Provider ID: 519686
 Provider Gender: Male
 License Number: 20A18400
 NPI: 1639606130


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100



 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROGERS, MATTHEW


Provider ID: 530207
 Provider Gender: Male
 NPI: 1639606130

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906


 Phone: (619) 662-4100
 Fax: (619) 824-9071

 After Hours Phone: (619) 662-4100

 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

SAIDRO, LUZVIMINDA


Provider ID: 519686
 Provider Gender: Female
 License Number: A93746
 NPI: 1750364386

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N

Hospital Affiliation: UC DAVIS MEDICAL CTR

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS RD

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

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C. دليل الرعاية الأولية

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,

Provider ID: 519686

NPI: 1174164719

☑ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

☎ Phone: (619) 662-4100

Fax: (619) 478-9164

☎ After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC

Provider ID: 519686

Provider Gender: Male

License Number: A112484

NPI: 1841496452

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: NATIVIDAD
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 519686

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1388 BUCKMAN SPRINGS

RD

CAMPO, CA 91906

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

CARLSBAD

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120

Provider Gender: Female

License Number: NP95003087

NPI: 1558701094

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

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C. دليل الرعاية الأولية

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

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120

Provider Gender: Female

License Number: NP95003087

NPI: 1558701094

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FQHC

TRUECARE,

Provider ID: 480120

NPI: 1245246917

Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 480120
 Provider Gender: Female
 License Number: A93248
 NPI: 1174703680
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
 Provider ID: 480120
 Provider Gender: Female
 License Number: A93248
 NPI: 1174703680
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

PEDIATRICS




BURGAMY, ELIZABETH
 Provider ID: 326275
 Provider Gender: Female
 NPI: 1164609558
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL

HOSPITAL
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3257 CAMINO DE LOS
 COCHES STE 202
 CARLSBAD, CA 92009
 Phone: (760) 633-3640
 Fax: (760) 633-3644
 After Hours Phone: (760)
 633-3640
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS









IYENGAR, RADHA
 Provider ID: 480120
 Provider Gender: Female
 License Number: A49273
 NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Tagalog, Tamil
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)

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736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

PEDIATRICS









IYENGAR, RADHA

Provider ID: 480120
 Provider Gender: Female
 License Number: A49273
 NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Tagalog, Tamil
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

SA 8AM-2PM








PEDIATRICS

MUTH, NATALIE

Provider ID: 328451
 Provider Gender: Female
 NPI: 1497982888
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3257 CAMINO DE LOS
 COCHES STE 202
 CARLSBAD, CA 92009
 Phone: (760) 633-3640
 Fax: (760) 633-3644
 After Hours Phone: (760)
 633-3640
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM



PEDIATRICS

OCONNOR, ERICA

Provider ID: 651599
 Provider Gender: Female
 NPI: 1134782725
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3257 CAMINO DE LOS
 COCHES STE 202
 CARLSBAD, CA 92009
 Phone: (760) 633-3640
 Fax: (760) 633-3644
 After Hours Phone: (760)
 633-3640
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

TANAKA, MARY

Provider ID: 465387
 Provider Gender: Female
 NPI: 1295962686
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Thai
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640
Fax: (760) 633-3644

After Hours Phone: (760) 633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480120

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480120

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767
Fax: (760) 720-7204

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

CHISWICK, GARY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 480120
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 Fax: (760) 720-7204
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
 Provider ID: 480120
 Provider Gender: Female
 License Number: PA53036
 NPI: 1922471192
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
 Provider ID: 480120
 Provider Gender: Female
 License Number: PA53036
 NPI: 1922471192
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1295 CARLSBAD VILLAGE
 DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

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

CHULA VISTA

CERTIFIED NURSE

PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355
 Provider Gender: Female
 License Number: NP23687
 NPI: 1952737033
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE



PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355
 Provider Gender: Male
 License Number: NP95001964

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NPI: 1194115568

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER



IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER



LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943


NPI: 1285772392

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER



OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female


License Number: NP95001492


NPI: 1073869145

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female

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License Number: RN371480

NPI: 1841200482

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female

License Number: NP5579

NPI: 1841200482

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: NP95015413

NPI: 1548683378

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, GROSSMONT

HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female

License Number: NP22000

NPI: 1821346826

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

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Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
 Provider ID: 206355
 Provider Gender: Female
 License Number: NP95013978
 NPI: 1881727386
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500

After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
 Provider ID: 206355
 Provider Gender: Female
 License Number: NM792
 NPI: 1174553259
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CHIROPRACTOR

HASHEM, SHIVA
 Provider ID: 206355
 Provider Gender: Female
 License Number: DC26269
 NPI: 1952950776
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

CHIROPRACTOR

KAZEM, HARON
 Provider ID: 427322
 Provider Gender: Male
 License Number: DC33295
 NPI: 1306221262
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish
 Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322

Provider Gender: Male

License Number: DC31963

NPI: 1760464960

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male

License Number: DC20760

NPI: 1285921627

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 427322

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 427322

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

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MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

VINCENT, LAUREN

Provider ID: 427322
Provider Gender: Female
License Number: A134303
NPI: 1053757997
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322
Provider Gender: Male
License Number: A124388
NPI: 1700175577
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AMANAT, SOROOSH

Provider ID: 427322
Provider Gender: Male
License Number: A153022
NPI: 1003279621

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

FAMILY PRACTICE

ARCEGOMEZ, LAURA

Provider ID: 427322
Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

License Number: A123604
NPI: 1053532986



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322
Provider Gender: Female
License Number: A138474
NPI: 1427475318

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS



MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP







 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 206355
Provider Gender: Female
License Number: A108681
NPI: 1114183688



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP CHULA VISTA
MED CTR
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO





 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641
Provider Gender: Female
License Number: A108681
NPI: 1114183688

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP CHULA VISTA
MED CTR
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619)
515-2325
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355
 Provider Gender: Female
 License Number: A153344
 NPI: 1467807560
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

ELSAIED, MOHAMMED

Provider ID: 19561
 Provider Gender: Male
 NPI: 1821033424
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Arabic, German,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MEMORIAL HOSPITAL,
 PARADISE VALLEY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

330 OXFORD ST STE 106
 CHULA VISTA, CA 91911
 Phone: (619) 409-1802
 Fax: (619) 409-1831
 After Hours Phone: (619)
 409-1802
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 9AM-5PM
 F 8AM-4PM

FAMILY PRACTICE

ELSAIED, MOHAMMED

Provider ID: 19561
 Provider Gender: Male
 NPI: 1821033424
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, German,

Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MEMORIAL HOSPITAL,
 PARADISE VALLEY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

330 OXFORD ST STE 106
 CHULA VISTA, CA 91911
 Phone: (619) 409-1802
 Fax: (619) 409-1831
 After Hours Phone: (619)
 409-1802
 Website: N/A

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 9AM-5PM
 F 8AM-4PM

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322
 Provider Gender: Female
 License Number: A120672
 NPI: 1154647410
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

HUBLEY, PAUL

Provider ID: 206355

Provider Gender: Male

License Number: A73172

NPI: 1568496974

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

JIMENEZ, KRISTAL

Provider ID: 427322

Provider Gender: Female

License Number: A159831

NPI: 1922531250

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 427322

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

LAW, KAREN

Provider ID: 427322



Provider Gender: Female

License Number: A138534

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C. دليل الرعاية الأولية

NPI: 1205253150


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MENON, POOJA

Provider ID: 427322

Provider Gender: Female


License Number: A123263


NPI: 1053600064


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MERRILL, SARAH

Provider ID: 427322

Provider Gender: Female

License Number: A123492

NPI: 1225399512

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY PRACTICE


MOYA, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103


NPI: 1174781132


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NGUYEN, LINH

Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 352 L ST

CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-5PM

FAMILY PRACTICE


PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

 **Provider English Spoken:** Y

 **Provider Language(s) Spoken:** Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 **678 3RD AVE**
CHULA VISTA, CA 91910

 **Phone:** (619) 662-4100

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

 **Website:** www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE


PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972


 **Provider English Spoken:** Y


 **Provider Language(s) Spoken:** Spanish

Cultural Competency: N

Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO

 **251 LANDIS AVE**
CHULA VISTA, CA 91910

 **Phone:** (619) 515-2500

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

 **Website:** www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE


PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

 **Provider English Spoken:** Y

 **Provider Language(s) Spoken:** Faroese, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 **678 3RD AVE**
CHULA VISTA, CA 91910

 **Phone:** (619) 662-4100

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


 **Website:** www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-5PM

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368


 **Provider English Spoken:** Y


 **Provider Language(s) Spoken:** Spanish

Cultural Competency: N

Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO

 **251 LANDIS AVE**
CHULA VISTA, CA 91910

 **Phone:** (619) 515-2500

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

 **Website:** www.fhcsd.org


Medi-Cal Open Panel: Yes

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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

 Provider English Spoken: Y

 Provider Language(s) Spoken: Czech

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

License Number: 20A15683

NPI: 1003293507


 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF SAN DIEGO

 352 L ST

CHULA VISTA, CA 91911

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE


ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060


NPI: 1427123991

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SERPAS, SHAILA

Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP




 678 3RD AVE

CHULA VISTA, CA 91910






 Phone: (619) 662-4100


 After Hours Phone: (619)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.









662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE







SHAHTAJI, ALAN
 Provider ID: 427322
 Provider Gender: Male
 License Number: 20A11087
 NPI: 1972751089
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

SWARTZ, JOHN
 Provider ID: 427322
 Provider Gender: Male
 License Number: G72486
 NPI: 1396754131
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

TALAVERA, GREGORY
 Provider ID: 427322
 Provider Gender: Male
 License Number: A40061
 NPI: 1740337161
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TEE, ALEXANDRA
 Provider ID: 427322
 Provider Gender: Female
 License Number: A164392
 NPI: 1881198406
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP


 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE


TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322

Provider Gender: Male

License Number: A118250

NPI: 1629394721

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322

Provider Gender: Male

License Number: A114600

NPI: 1942435144

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355

NPI: 1346480837

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF

SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641

NPI: 1083959464

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619)

515-2325

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322

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C. دليل الرعاية الأولية


NPI: 1326486861

 Provider English Spoken: Y
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 Fax: (619) 425-6941

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,


Provider ID: 664445


NPI: 1184135873

 Provider English Spoken: Y
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 Fax: (619) 426-2170


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322

Provider Gender: Female


License Number: DDS102880


NPI: 1366917353


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 427322

Provider Gender: Female

License Number: 20A19457

NPI: 1295362242


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA

Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS

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C. دليل الرعاية الأولية

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 427322

Provider Gender: Female

License Number: C55563

NPI: 1093803520

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

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

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

HAMMETT, ERIN

Provider ID: 427322

Provider Gender: Female

License Number: 20A14025

NPI: 1467884098

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND HEALTHCARE CTR, SANTA BARBARA COTTAGE HOSP, GOLETA VALLEY COTTAGE HOSP

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

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

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

INTERNAL MEDICINE

KAKAIYA, ROSHNI

Provider ID: 427322

Provider Gender: Female

License Number: 20A19485

NPI: 1073179529

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

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

Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

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N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

INTERNAL MEDICINE


KIM, JIUN

Provider ID: 427322

Provider Gender: Female


License Number: C182935


NPI: 1598020752


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


UWEDJOJEVWE, LETICIA

Provider ID: 380242

Provider Gender: Female

NPI: 1891882221

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS


MEDICAL GROUP-SD

 340 4TH AVE STE 10
CHULA VISTA, CA 91910

 Phone: (619) 934-2215

Fax: (619) 500-5955

 After Hours Phone: (619)
934-2215

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-5PM
F 8AM-4PM

INTERNAL MEDICINE


VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male


License Number: 20A12555


NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes


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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA


Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)

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Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)

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Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

📍 251 LANDIS AVE
 CHULA VISTA, CA 91910
 📞 Phone: (619) 515-2500
 🕒 After Hours Phone: (619)
 515-2500
 🌐 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
 Provider ID: 206355
 Provider Gender: Female
 License Number: A116680
 NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

📍 251 LANDIS AVE
 CHULA VISTA, CA 91910
 📞 Phone: (619) 515-2500
 🕒 After Hours Phone: (619)
 515-2500
 🌐 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
 Provider ID: 427322
 Provider Gender: Male
 License Number: A47906
 NPI: 1437181922
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, BAKERSFIELD
 MEMORIAL HOSP, SHARP
 MEMORIAL HOSPITAL,
 Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, KERN MEDICAL
 CENTER, KERN MEDICAL
 CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP






📍 678 3RD AVE
 CHULA VISTA, CA 91910
 📞 Phone: (619) 662-4100
 🕒 After Hours Phone: (619)
 662-4100
 🌐 Website: www.syhealth.org
 /clinics/chula- vista- medic
 al- plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
 Provider ID: 206355
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية


 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI



Provider ID: 427322
Provider Gender: Male
License Number: G59670
NPI: 1902993660
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP





 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org



/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ


Provider ID: 427322
Provider Gender: Male
License Number: A114893
NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP






 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 427322
Provider Gender: Female
License Number: 20A8204

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

NPI: 1053407593

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206355

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

OPHTHALMOLOGY


PAPASTERGIU, GEORGIOS


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 Provider English Spoken: Y

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

Cultural Competency: N


Hospital Affiliation: EL


CENTRO REGIONAL MEDICAL


CENTER, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

AKASHI, MARC

Provider ID: 163322

Provider Gender: Male

NPI: 1205002417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP CHULA VISTA MED
CTR, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

ATIENZA, PAMELA

Provider ID: 106987

Provider Gender: Female

NPI: 1417916107

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

890 EASTLAKE PKWY STE
200
CHULA VISTA, CA 91914

Phone: (619) 656-6817

Fax: (619) 656-6908

After Hours Phone: (619)
506-1218

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 70456

Provider Gender: Male

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

890 EASTLAKE PKWY STE 200

CHULA VISTA, CA 91914

Phone: (619) 656-6817

Fax: (619) 656-6908

After Hours Phone: (619) 656-6817

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

PEDIATRICS

BROUDY, ABRAHAM

Provider ID: 109328

Provider Gender: Male

NPI: 1528039526

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619) 656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

CAPETANAKIS, ELENI

Provider ID: 89610

Provider Gender: Female

NPI: 1346211554

Provider English Spoken: Y

Provider Language(s) Spoken: Greek, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

CORDOBA, MIGUEL

Provider ID: 88187

Provider Gender: Male

NPI: 1053382176

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SHARP CHULA VISTA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910
Fax: (619) 426-2337

After Hours Phone: (619)
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

DORINGO, ELAINIE

Provider ID: 267100

Provider Gender: Female

NPI: 1013005636

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,

SHARP CHULA VISTA MED
CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

FLETCHER, EMILY

Provider ID: 232312

Provider Gender: Female

NPI: 1780935940

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

MERCY HOSPITAL
BAKERSFIELD, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,

UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619) 656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652

Provider Gender: Male

NPI: 1043848807

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SA 8AM-0PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102434

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

1741 EASTLAKE PKWY STE 107

CHULA VISTA, CA 91915

Phone: (619) 482-1700

Fax: (619) 475-4578

After Hours Phone: (619) 482-1700

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

GARCIA, CARLOS

Provider ID: 64734

Provider Gender: Male

NPI: 1417959370

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

1392 E PALOMAR ST STE 501

CHULA VISTA, CA 91913

Phone: (619) 271-4059

Fax: (619) 271-7451

After Hours Phone: (619) 271-4059

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 752 MEDICAL CENTER CT STE 210
 CHULA VISTA, CA 91911
 Phone: (619) 656-0206
 Fax: (619) 656-8936
 After Hours Phone: (619) 656-0206
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 634787
 Provider Gender: Female
 NPI: 1508904657
 Provider English Spoken: Y
 Provider Language(s) Spoken: Faroese, Farsi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 280 E ST
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 664445
 Provider Gender: Female
 License Number: C51110
 NPI: 1508904657
 Provider English Spoken: Y
 Provider Language(s) Spoken: Faroese, Farsi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL



Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 280 E ST
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

HOLLICK, NATALIE



Provider ID: 473802
 Provider Gender: Female
 NPI: 1558716845
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: Yes RADY CHILDRENS HEALTH NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911
 Phone: (619) 426-7910
 Fax: (619) 426-2337
 After Hours Phone: (619) 426-7910
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*







PEDIATRICS

ISAIAS, AGNELA

Provider ID: 664445
Provider Gender: Female
License Number: A82912
NPI: 1790772572
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 *280 E ST CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*
Fax: (619) 426-2170
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS







JACOBS-KLEISLI, MILAGROS

Provider ID: 467596
Provider Gender: Female
NPI: 1811221641
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, HUNTINGTON MEMORIAL HOSPITAL, USC Arcadia Hospital
Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 *769 MEDICAL CENTER CT STE 300 CHULA VISTA, CA 91911*
 *Phone: (619) 482-3090*
Fax: (619) 482-7350
 *After Hours Phone: (619) 482-3090*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM SA 8AM-0PM*

PEDIATRICS



KORSAND, SID

Provider ID: 664445
Provider Gender: Male
License Number: A49591

NPI: 1588634513
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 *280 E ST CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

PEDIATRICS

KORSAND, SID

Provider ID: 634788
Provider Gender: Male
NPI: 1588634513
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 *280 E ST CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Fax: (619) 662-4196

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

MCMAHON, SHARON

Provider ID: 648721

Provider Gender: Female

NPI: 1487279246

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 865 THIRD AVE STE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 426-7910

Fax: (619) 426-2337

☎ After Hours Phone: (619) 426-7910

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-0PM

PEDIATRICS

MISTRY, CHETAN

Provider ID: 86439

Provider Gender: Male

NPI: 1467505834

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 2440 FENTON ST STE 100
CHULA VISTA, CA 91914

☎ Phone: (619) 656-3040

Fax: (619) 656-3045

☎ After Hours Phone: (619) 656-3040

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 371232

Provider Gender: Female

NPI: 1144238098

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911

☎ Phone: (619) 482-3090

Fax: (619) 482-7350

☎ After Hours Phone: (619) 482-3090

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 463001

Provider Gender: Female

NPI: 1144238098

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101 CHULA VISTA, CA 91911

Phone: (619) 426-7910

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, TRUC

Provider ID: 78518

Provider Gender: Female

NPI: 1881884054

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

WASHINGTON HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2440 FENTON ST STE 100 CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619) 656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

OIRA, VICTORIA

Provider ID: 73140

Provider Gender: Female

NPI: 1134172448

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

890 EASTLAKE PKWY STE 203 CHULA VISTA, CA 91914

Phone: (619) 656-3020

Fax: (619) 656-3019

After Hours Phone: (619)

370-6661

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-4:30PM

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445
 Provider Gender: Female
 License Number: A92037
 NPI: 1992876759

Provider English Spoken: Y
 Provider Language(s) Spoken: Persian
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

280 E ST
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355
 Provider Gender: Female
 License Number: A78355
 NPI: 1912938325

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
 Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SANTIAGO, ROXANE

Provider ID: 269279
 Provider Gender: Female
 NPI: 1033461801

Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101
 CHULA VISTA, CA 91911
 Phone: (619) 426-7910
 Fax: (619) 426-2337

After Hours Phone: (619) 426-7910
 Website: N/A

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322
 Provider Gender: Male
 License Number: A45942
 NPI: 1396812236

Provider English Spoken: Y
 Provider Language(s) Spoken: Gujarati, Hindi, Urdu
 Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY

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HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104059
Provider Gender: Female
NPI: 1275541625
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915
Phone: (619) 482-1700
Fax: (619) 475-4578

After Hours Phone: (619) 482-1700

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

YAO, CATHERINE

Provider ID: 371204
Provider Gender: Female
NPI: 1801166442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS


ZARGAR, SHABNAM

Provider ID: 371075
Provider Gender: Female
NPI: 1417256074
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <hr/> <p>PHYSICIANS ASSISTANT</p> <p>BALDONADO, ANALICIA</p> <p><i>Provider ID: 417641</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: PA61683</i></p> <p><i>NPI: 1215477765</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 352 L ST CHULA VISTA, CA 91911</p> <p> <i>Phone: (619) 515-2325</i></p> <p> <i>After Hours Phone: (619) 515-2325</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <hr/> <p>PHYSICIANS ASSISTANT</p> <p>INDA, PRISCILLA</p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: PA54404</i></p>	<p><i>NPI: 1679008379</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Arabic, Russian, Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/chula- vista- medical- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <hr/> <p>PHYSICIANS ASSISTANT</p> <p>MENDEZ, JESUS</p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: PA13796</i></p> <p><i>NPI: 1023202108</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p>	<p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/chula- vista- medical- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p>PHYSICIANS ASSISTANT</p> <p>QUICK, ELISABETH</p> <p><i>Provider ID: 206355</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: PA21591</i></p> <p><i>NPI: 1790055010</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


REVELES, DIANA

Provider ID: 417641

Provider Gender: Female

License Number: PA19306

NPI: 1548455405


 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 352 L ST

CHULA VISTA, CA 91911

 *Phone: (619) 515-2325*

 *After Hours Phone: (619) 515-2325*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PODIATRIST

MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

 *After Hours Phone: (619)*

515-2500

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189

NPI: 1437445566

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

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

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 206355
 Provider Gender: Male
 License Number: PT295173
 NPI: 1497236384
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355
 Provider Gender: Female
 License Number: PT294245
 NPI: 1215402177
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO


 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

REGISTERED PHYSICAL THERAPIST


GONZALES, MICHELLE

Provider ID: 206355
 Provider Gender: Female
 License Number: PT291706
 NPI: 1548714652

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

REGISTERED PHYSICAL THERAPIST


MIGNEA, DAVID

Provider ID: 206355
 Provider Gender: Male
 License Number: PT293536
 NPI: 1043736879

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
 SAN DIEGO

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA



Provider ID: 206355
 Provider Gender: Female
 License Number: PT292823
 NPI: 1770025595

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 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

RHEUMATOLOGY

REDDY, DANA



Provider ID: 427322
 Provider Gender: Female
 License Number: A115598
 NPI: 1144538778
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
**CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL**

ENCINITAS
 Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

CABADING, DOREEN


Provider ID: 427322
 Provider Gender: Female
 License Number: SP18192
 NPI: 1043507585
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None





American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

EL CAJON

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER

Provider ID: 418340
 Provider Gender: Male
 License Number: NP95009292
 NPI: 1386120723
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 569910
 Provider Gender: Female
 License Number: NP95012943
 NPI: 1477755684



Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
 Provider ID: 418340
 Provider Gender: Male
 License Number: NP95007000
 NPI: 1932622156





Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF


SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
 Provider ID: 569910
 Provider Gender: Female
 License Number: NP95001707
 NPI: 1164812293

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Persian, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL
 Provider ID: 569910
 Provider Gender: Female
 License Number: NP95009329
 NPI: 1780177147

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

JENSEN, ADRIENNE
 Provider ID: 569910
 Provider Gender: Female
 License Number: NP95023148
 NPI: 1184389934

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA

Provider ID: 206354

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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C. دليل الرعاية الأولية

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 418501
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185267
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692

Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692

Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

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Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

REAL, MARIA

Provider ID: 185267
Provider Gender: Female
License Number: NP17328
NPI: 1548450471

Provider English Spoken: Y
Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

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

After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

REGEV, SHANEE

Provider ID: 569910
Provider Gender: Female
License Number: NP95022460
NPI: 1477218121

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185267
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340
Provider Gender: Female
License Number: NP15444
NPI: 1780603597

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SWAN, MELANIE

Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

**VERDUZCO GONZALEZ,
AURORA**

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

**VILLANUEVADEGUTIE,
BERENICE**

Provider ID: 185267

Provider Gender: Female



License Number: NP95002188

NPI: 1952795536





Provider English Spoken: Y



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Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org






Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA
Provider ID: 185267
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 418340
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE






CORRY, ANDREA
Provider ID: 418340
Provider Gender: Female
License Number: NM1721
NPI: 1255489571
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 418501
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 1032 BROADWAY


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






EL CAJON, CA 92021

 Phone: (619) 795-5983
 After Hours Phone: (619) 795-5983
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR


SOSA, DAVID






Provider ID: 418340
 Provider Gender: Male
 License Number: DC33150
 NPI: 1013308675
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR



SOSA, DAVID

Provider ID: 206354
 Provider Gender: Male
 License Number: DC33150
 NPI: 1013308675
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO






 1111 W CHASE AVE
 EL CAJON, CA 92020
 Phone: (619) 515-2499
 After Hours Phone: (619) 515-2499
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

UY, ASHLEY

Provider ID: 418340
 Provider Gender: Female
 License Number: DC33869
 NPI: 1174059760
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 418340
 Provider Gender: Female
 License Number: A149552
 NPI: 1750780516
 Provider English Spoken: Y
 Provider Language(s) Spoken: Bengali, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (616) 515-2498
 After Hours Phone: (616) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8:30AM-5:30PM


ENDOCRINOLOGY

METABOLISM DIABETES



NAGELBERG, JODI

Provider ID: 418340
 Provider Gender: Female
 License Number: A146838
 NPI: 1720474141
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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



 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM



FAMILY PRACTICE

AL ANI, NAJWAN

Provider ID: 418340
 Provider Gender: Female
 License Number: A144974
 NPI: 1275948473
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO


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

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM

FAMILY PRACTICE

ALGHAMDI, ASMA


Provider ID: 569910
 Provider Gender: Female
 License Number: A167529
 NPI: 1316310840
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD


EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340
 Provider Gender: Male
 License Number: A163977
 NPI: 1942705637
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DOMINGUEZ, DENNIS

Provider ID: 569910

Provider Gender: Male

License Number: G43179

NPI: 1225063811

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

GORDON, CHRISTOPHER

Provider ID: 418340

Provider Gender: Male

License Number: A83390

NPI: 1477711521

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 525 E MAIN ST

EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FAMILY PRACTICE

HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female

License Number: A110192

NPI: 1861648461

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 1111 W CHASE AVE

EL CAJON, CA 92020

☎ Phone: (619) 515-2499

🕒 After Hours Phone: (619)
515-2499

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male

License Number: A177445

NPI: 1922619766

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 525 E MAIN ST

EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

KASAWA, JOHN

Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 875 EL CAJON BLVD

EL CAJON, CA 92020

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

Niazi, Harris

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267

Provider Gender: Male

License Number: A68184

NPI: 1144300534

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 664824

Provider Gender: Male

License Number: A68184

NPI: 1144300534

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

LA MAESTRA FAMILY CLINIC

181 REA AVE
EL CAJON, CA 92020
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619) 795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL): FAMILY HEALTH CENTERS OF N
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,

Provider ID: 206354
NPI: 1104861681

☑ Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 1111 W CHASE AVE
EL CAJON, CA 92020
☎ Phone: (619) 515-2499
Fax: (619) 593-7164

🕒 After Hours Phone: (619) 515-2499

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: 418340
NPI: 1932561198

☑ Provider English Spoken: Y
Cultural Competency: N

SAN DIEGO

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498
Fax: (619) 269-0191

🕒 After Hours Phone: (619) 515-2498

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,

Provider ID: 418501
NPI: 1134590086

☑ Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC

📍 1032 BROADWAY
EL CAJON, CA 92021
☎ Phone: (619) 795-5991
Fax: (619) 795-5992

🕒 After Hours Phone: (619) 795-5991

🌐 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,

Provider ID: 664824
NPI: 1609849074

☑ Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC

📍 181 REA AVE
EL CAJON, CA 92020

☎ Phone: (619) 312-0347
Fax: (619) 510-4649

🕒 After Hours Phone: (619) 312-0347

🌐 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FQHC







LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267
NPI: 1336353721

☑ Provider English Spoken: Y
Cultural Competency: N






LA MAESTRA FAMILY CLINIC


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 Fax: (619) 749-5480
 After Hours Phone: (619)
 312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8AM-5PM
 TH-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH EL CAJON,




Provider ID: 569910
 NPI: 1568845741
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 785-3356
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185267
 Provider Gender: Male
 License Number: G45632
 NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Dutch, French,
 Spanish, Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC







 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
 312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

INTERNAL MEDICINE

ALWASH, MUSTAFA



Provider ID: 418340
 Provider Gender: Male
 License Number: A160516
 NPI: 1679936439

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 569910
 Provider Gender: Male
 License Number: 20A18702
 NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Assyrian, Syriac
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340
Provider Gender: Female
License Number: A127798
NPI: 1629339304
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic

Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910

Provider Gender: Female

License Number: A164238

NPI: 1396277737

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910

Provider Gender: Male

License Number: A138568

NPI: 1720497514

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910

Provider Gender: Male

License Number: A144513

NPI: 1467871673

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

INTERNAL MEDICINE

NADI, FAHIMA

Provider ID: 418340

Provider Gender: Female

License Number: A175325

NPI: 1770072290


Provider English Spoken: Y

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C. دليل الرعاية الأولية


 **Provider Language(s)**
Spoken: Pashto, Persian,
Urdu
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

NARAYAN, ARCHANA

Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950

 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Hindi, Kannada
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

PARIKH, MILIND


Provider ID: 418340
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406


 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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



 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes




Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


INTERNAL MEDICINE

REDDY, ARJUN


Provider ID: 428134
Provider Gender: Male
NPI: 1730132457

 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 5442 SYCUAN RD
EL CAJON, CA 92019
 Phone: (619) 445-0707
Fax: (619) 445-0988
 After Hours Phone: (619)
445-0707

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-4PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185267

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Provider Gender: Male
 License Number: C55979
 NPI: 1740254713

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Assyrian,
 Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, GROSSMONT
 HOSPITAL
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC

165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 269-1262
 After Hours Phone: (619)
 269-1262
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8AM-5PM
 TH-F 8AM-5PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 418501
 Provider Gender: Male
 License Number: C55979
 NPI: 1740254713

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Assyrian,
 Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, GROSSMONT
 HOSPITAL
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC

1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5983
 After Hours Phone: (619)
 795-5983
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

INTERNAL MEDICINE

ROUEL, LINDA

Provider ID: 308485
 Provider Gender: Female
 NPI: 1326128950

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Assyrian,
 Mandarin, Syriac
 Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP
 MEMORIAL HOSPITAL,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 Phone: (619) 456-9920
 Fax: (619) 456-9340
 After Hours Phone: (619)
 456-9920
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-7PM

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

Provider ID: 569910
 Provider Gender: Female
 License Number: A159247
 NPI: 1972946770






Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Hindi, Urdu
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON
 Provider ID: 569910
 Provider Gender: Male
 License Number: C144411
 NPI: 1790744795
 Provider English Spoken: Y
 Provider Language(s) Spoken: Armenian, Hebrew
 Cultural Competency: N
 Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PROVIDER

INTERNAL MEDICINE

YOON, TAE
 Provider ID: 418340
 Provider Gender: Male
 License Number: C161090
 NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN
 Provider ID: 569910
 Provider Gender: Male
 License Number: A96002
 NPI: 1730258401

Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI
 Provider ID: 418340
 Provider Gender: Female
 License Number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N


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Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE


Provider ID: 418340
Provider Gender: Female
License Number: A68463
NPI: 1376663831

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN*

AND NEWBORNS
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*



OBSTETRICS / GYNECOLOGY

CARTER, KHALIL


Provider ID: 418340
Provider Gender: Male
License Number: A113001
NPI: 1225231582

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR*
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO


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

 *After Hours Phone: (619)
515-2498*

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 *Accessibility: CONTACT
PROVIDER*

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

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 418340
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital*
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

1032 BROADWAY

EL CAJON, CA 92021

Phone: (619) 795-5991


After Hours Phone: (619)
795-5991


Website: www.lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL):  Hours: M-F
8:30AM-5:30PM

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

N
 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, KERN MEDICAL

CENTER, KERN MEDICAL


CENTER


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340

Provider Gender: Female

License Number: A164859

NPI: 1952751711

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 418340

Provider Gender: Male

License Number: G78814

NPI: 1699790634

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

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C. دليل الرعاية الأولية

CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340
Provider Gender: Male
License Number: A107093
NPI: 1588825129

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 569910

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Farsi, French, Greek, Italian, Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 569910

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 569910

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185267

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, French, Spanish

Cultural Competency: N

Board Certified Specialty: No




LA MAESTRA FAMILY CLINIC

165 S 1ST ST

EL CAJON, CA 92019





Phone: (619) 280-4213



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 After Hours Phone: (619) 280-4213
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS





ALWAHAB, AREEJ

Provider ID: 678064
 Provider Gender: Female
 NPI: 1497138002
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: ST BERNARDINE MED CTR, KAISER FOUNDATION HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 250 E CHASE AVE STE 110 EL CAJON, CA 92020
 Phone: (619) 399-7878
 Fax: (858) 499-5006
 After Hours Phone: (619) 399-7878
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
 Provider Gender: Female
 License Number: A123929
 NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N





 Accessibility: CONTACT PROVIDER

PEDIATRICS



CONE, STEPHANIE

Provider ID: 418501
 Provider Gender: Female
 License Number: A123929
 NPI: 1437444858

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC

 1032 BROADWAY EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

PEDIATRICS


FLEMING, TARA

Provider ID: 418340
 Provider Gender: Female
 License Number: A152462

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية


NPI: 1972965242


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

HOANG, VY

Provider ID: 546310

Provider Gender: Female

NPI: 1649575135


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS


JACKSON, DANA


Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N


Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

JONES, SETAREH

Provider ID: 185267

Provider Gender: Female

License Number: A110010


NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.or
g



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N





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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM*

PEDIATRICS

JONES, SETAREH

Provider ID: 418501
Provider Gender: Female
License Number: A110010
NPI: 1033441316
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC


 1032 BROADWAY
 EL CAJON, CA 92021
 *Phone: (619) 795-5983*
 *After Hours Phone: (619) 795-5983*
 *Website: www.lamaestra.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM*


PEDIATRICS



KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female
License Number: A147976
NPI: 1932514353
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO



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

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM*

PEDIATRICS

NAGNUR, PRITI



Provider ID: 206354
Provider Gender: Female
License Number: A170055
NPI: 1316289929
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Kannada*
Cultural Competency: N
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 1111 W CHASE AVE

EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

NAIK, SHILPA

Provider ID: 546498
Provider Gender: Female
NPI: 1902156904
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 844 JACKMAN ST
 EL CAJON, CA 92020
 *Phone: (619) 442-2560*
Fax: (619) 442-7836
 *After Hours Phone: (619) 442-2560*
 *Website: N/A*
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 546215

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, VI

Provider ID: 546509

Provider Gender: Female

NPI: 1053540534

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

📍 844 JACKMAN ST
EL CAJON, CA 92020

☎ Phone: (619) 442-2560

Fax: (619) 442-7836

📞 After Hours Phone: (619) 442-2560

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

PINTO, ANITA

Provider ID: 546215

Provider Gender: Female

NPI: 1477663722

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 844 JACKMAN ST
EL CAJON, CA 92020

☎ Phone: (619) 442-2560

Fax: (619) 442-7836

📞 After Hours Phone: (619)
442-2560

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910

Provider Gender: Male

License Number: A134995

NPI: 1508209651

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

☎ Phone: (619) 662-4100

📞 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

☑ Provider English Spoken: Y
Cultural Competency: N





Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC







📍 165 S 1ST ST

EL CAJON, CA 92019







اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT



ALYAS, ALISIA
 Provider ID: 418501
 Provider Gender: Female
 License Number: PA58466
 NPI: 1437768017
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT





ARMENTA, JORGE
 Provider ID: 185267
 Provider Gender: Male
 License Number: PA13694
 NPI: 1346382611
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PHYSICIANS ASSISTANT

CONDEZ, EDESEL
 Provider ID: 418340
 Provider Gender: Male
 License Number: PA53129
 NPI: 1073978680
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY
 Provider ID: 185267
 Provider Gender: Female
 License Number: PA21625
 NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

<p>N 🇨🇦 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM</p>	<p>License Number: PA18719 NPI: 1447468137 🇨🇦 Provider English Spoken: Y 🇨🇦 Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 📍 1111 W CHASE AVE EL CAJON, CA 92020 📞 Phone: (619) 515-2499 🕒 After Hours Phone: (619) 515-2499 🌐 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇨🇦 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8:30AM-5:30PM</p>	<p>EL CAJON, CA 92020 📞 Phone: (619) 662-4100 🕒 After Hours Phone: (619) 662-4100 🌐 Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇨🇦 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM</p>
<hr/> <p>PHYSICIANS ASSISTANT</p> <p>MERCER, KELLY Provider ID: 418501 Provider Gender: Female License Number: PA21625 NPI: 1154609790 🇨🇦 Provider English Spoken: Y 🇨🇦 Provider Language(s) Spoken: Arabic Cultural Competency: N Board Certified Specialty: No LA MAESTRA FAMILY CLINIC 📍 1032 BROADWAY EL CAJON, CA 92021 📞 Phone: (619) 795-5991 🕒 After Hours Phone: (619) 795-5991 🌐 Website: www.lamaestra.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇨🇦 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8:30AM-5:30PM</p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <p>TURNER, ERIC Provider ID: 206354 Provider Gender: Male License Number: PA55067 NPI: 1669756128 🇨🇦 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 📍 1111 W CHASE AVE EL CAJON, CA 92020 📞 Phone: (619) 515-2499 🕒 After Hours Phone: (619) 515-2499 🌐 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇨🇦 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8:30AM-5:30PM</p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <p>ROSENBLATT, SHERILYN Provider ID: 569910 Provider Gender: Female License Number: PA22872 NPI: 1114041621 🇨🇦 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 875 EL CAJON BLVD</p>
<hr/> <p>PHYSICIANS ASSISTANT</p> <p>PATEL, SHREYA Provider ID: 206354 Provider Gender: Female</p>		<hr/> <p>PHYSICIANS ASSISTANT</p> <p>TURNER, ERIC Provider ID: 206354 Provider Gender: Male License Number: PA55067 NPI: 1669756128 🇨🇦 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 📍 1111 W CHASE AVE EL CAJON, CA 92020 📞 Phone: (619) 515-2499 🕒 After Hours Phone: (619) 515-2499 🌐 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇨🇦 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8:30AM-5:30PM</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 418340

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2400

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PODIATRIST

LE, DIANA

Provider ID: 418340

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498


Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

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 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910

Provider Gender: Female


License Number: PT40025


NPI: 1952982761

 *Provider English Spoken: Y Cultural Competency: N*

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

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

 *Website: www.syhealth.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

REGISTERED PHYSICAL THERAPIST

GUTIERREZ, JUSTINE

Provider ID: 418340

Provider Gender: Female


License Number: PT292482

NPI: 1851834873


 *Provider English Spoken: Y Cultural Competency: N*

Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM*

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY

Provider ID: 569910

Provider Gender: Male


License Number: PT42665


NPI: 1912640053

 *Provider English Spoken: Y Cultural Competency: N*

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

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

 *Website: www.syhealth.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male


License Number: PT293536


NPI: 1043736879

 *Provider English Spoken: Y Cultural Competency: N*

Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM*

ENCINITAS

PEDIATRICS

BRION, SONJA

Provider ID: 386639

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Female
 NPI: 1306817317
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, RADY CHILDRENS
 HOSPITAL SAN DIEGO,
 SCRIPPS MEMORIAL
 HOSPITAL
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 499 N EL CAMINO REAL
 STE B100
 ENCINITAS, CA 92024
 Phone: (760) 436-4511
 Fax: (760) 436-5106
 After Hours Phone: (760)
 436-4511
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

CLEMENTINO, NANCY

Provider ID: 386643
 Provider Gender: Female
 NPI: 1619948619
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 499 N EL CAMINO REAL
 STE B100
 ENCINITAS, CA 92024
 Phone: (760) 436-4511
 Fax: (760) 436-5106
 After Hours Phone: (760)
 436-4511
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

MENDENHALL, ANNA

Provider ID: 386635
 Provider Gender: Female
 NPI: 1639140650
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
 SCRIPPS MEMORIAL
 HOSPITAL
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 499 N EL CAMINO REAL
 STE B100
 ENCINITAS, CA 92024
 Phone: (760) 436-4511
 Fax: (760) 436-5106
 After Hours Phone: (760)
 436-4511
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

TERRY, AMANDA

Provider ID: 386739
 Provider Gender: Female
 NPI: 1861770885
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, UCSF
 BENIOFF CHILDREN'S

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

HOSPITAL OAKLAND

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

TOLBA, KAMEI

Provider ID: 386624

Provider Gender: Male

NPI: 1144221763

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

499 N EL CAMINO REAL
STE B100

ENCINITAS, CA 92024

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

ESCONDIDO

CERTIFIED NURSE

PRACTITIONER

CARNEY, AMY

Provider ID: 206271

Provider Gender: Female

License Number: NP8169

NPI: 1164445227

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760)
737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM
W 9AM-5PM

TH-F 8AM-5PM

CERTIFIED NURSE

PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Provider Gender: Female
License Number: NP4799
NPI: 1356365365
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 588941
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100

After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROBINSON, DEAN
Provider ID: 206270
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR






ZECHA, RONALD
Provider ID: 206270
Provider Gender: Male

License Number: DC28605
NPI: 1427252121
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

FAMILY PRACTICE

ARRIETA, NOEMI
Provider ID: 588941
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP






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 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


FAMILY PRACTICE

AVILA, MICHAEL
 Provider ID: 206270
 Provider Gender: Male
 License Number: A159727
 NPI: 1962936450
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
 520-8100
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-0PM

FAMILY PRACTICE







CASTANER, ZALYA
 Provider ID: 206271
 Provider Gender: Female
 License Number: A139490
 NPI: 1487072179
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W 8AM-8PM
 TH-F 8AM-5PM

FAMILY PRACTICE


CASTANER, ZALYA
 Provider ID: 206270
 Provider Gender: Female
 License Number: A139490
 NPI: 1487072179
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 MEDICAL CENTER

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
 520-8100
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

COBIAN, VANESSA
 Provider ID: 206271
 Provider Gender: Female
 License Number: A145349
 NPI: 1134513039
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

Provider Gender: Female


License Number: C171064

NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female


License Number: 20A14772


NPI: 1235576059

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (760) 546-2858


 After Hours Phone: (760)
546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUR, JATINDER


Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

FAMILY PRACTICE

LAI, AMARA









Provider ID: 206271

Provider Gender: Female

License Number: A120348





NPI: 1790912855




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 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8AM-5PM
 W 9AM-5PM
 TH-F 8AM-5PM

FAMILY PRACTICE









MATSHE, ZENZIWE

Provider ID: 665448
 Provider Gender: Female
 NPI: 1285256073
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (760) 466-1373
 After Hours Phone: (760)

520-8100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM


FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270
 Provider Gender: Female
 License Number: 20A14292
 NPI: 1326458373
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
 520-8100
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-0PM

FAMILY PRACTICE




NAKAMURA, MELANIE

Provider ID: 206270
 Provider Gender: Female
 License Number: A107557
 NPI: 1104022672
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
 520-8100
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-0PM

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270
 Provider Gender: Male
 License Number: A94128
 NPI: 1902921406
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100

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C. دليل الرعاية الأولية

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128

NPI: 1902921406

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

☎ After Hours Phone: (760) 737-6900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RODARTE, GABRIEL

Provider ID: 206266

Provider Gender: Male

License Number: A87906

NPI: 1184649212

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

☎ After Hours Phone: (760) 520-8340

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY PRACTICE

SANDHU, BASANT

Provider ID: 206271

Provider Gender: Male

License Number: A140398

NPI: 1265795744

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Hindi, Punjabi, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY

ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760) 737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Greek, Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Greek, Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY

ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760) 737-6900

Website: N/A

Medi-Cal Open Panel: Yes

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TANTOD, KULIN

Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1417640491

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE


THOMPSON, CHERYL

Provider ID: 206270

Provider Gender: Female

License Number: A102687

NPI: 1548429863

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM
SA 8AM-0PM

FQHC

ESCONDIDO FAMILY HEALTH


CENTER,


Provider ID: 652372

 Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619) 515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FQHC

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,

Provider ID: 206270


NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS

AND PRENATAL,


Provider ID: 424775

NPI: 1437335353

 Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

Fax: (360) 462-2747

 After Hours Phone: (760) 690-5900

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDS AND

PRENATAL,

Provider ID: 206266

NPI: 1265618185

 Provider English Spoken: Y

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Cultural Competency: N
IHP OF SOUTHERN CAL-PHP

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271

NPI: 1720264641

Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900
Fax: (360) 462-2748

After Hours Phone: (760) 737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239

Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100
Fax: (760) 745-7847

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

128 N BROADWAY
ESCONDIDO, CA 92025

Phone: (760) 546-2858
After Hours Phone: (760) 546-2858

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-0PM

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 235296

Provider Gender: Female

NPI: 1659305084

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 462-2745

☎ After Hours Phone: (760) 520-8100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-0PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male

License Number: C53062

NPI: 1679102461

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-0PM

PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 425 N DATE ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

☎ After Hours Phone: (760) 520-8340

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

After Hours Phone: (760)
690-5900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ALDANA, NANCY

Provider ID: 424775

Provider Gender: Female

License Number: A62467

NPI: 1558371963

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

After Hours Phone: (760)
520-8340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

CHOW, BYRON

Provider ID: 206270

Provider Gender: Male

License Number: A78116

NPI: 1619907607

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

COHEN, CARA

Provider ID: 661879

Provider Gender: Female

NPI: 1215021274

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, RADY CHILDRENS
HOSPITAL SAN DIEGO,
PALOMAR MEDICAL CENTER,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025


Phone: (760) 746-2641

Fax: (760) 740-2178


After Hours Phone: (760)
746-2641


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

COULLAHAN, JESSICA

Provider ID: 661887


Provider Gender: Female


NPI: 1750579108

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025

 Phone: (760) 746-2641

Fax: (760) 740-2178


 After Hours Phone: (760) 746-2641


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8:30AM-0PM

PEDIATRICS


CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DOSHI, NEELIMA


Provider ID: 424775

Provider Gender: Female

License Number: A67626

NPI: 1417921578

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


DOSHI, NEELIMA

Provider ID: 640252

Provider Gender: Female

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 426 N DATE ST

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ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SONG, JOYCE

Provider ID: 661892

Provider Gender: Female

NPI: 1417510694

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760) 746-2641

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270

Provider Gender: Female

License Number: A45413

NPI: 1134154958

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA

Provider ID: 424775

Provider Gender: Female

License Number: G83438

NPI: 1730288747

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

After Hours Phone: (760) 690-5900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ZAND, FARIBA

Provider ID: 87737

Provider Gender: Female

NPI: 1356373674

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish

Cultural Competency: N

Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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NETWORK

240 W MISSION AVE STE A
ESCONDIDO, CA 92025
Phone: (760) 747-5400
Fax: (760) 747-2286
After Hours Phone: (760)
747-5400
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
St Joseph Hospital

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760)
737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FALLBROOK

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

Provider English Spoken: Y
Provider Language(s)
Spoken: Sign Language
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200
Website: www.vistacommu
nityclinic.org
Medi-Cal Open Panel: Yes


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767


Provider English Spoken: Y


Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760)
723-6200


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767


Provider English Spoken: Y


Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

Provider English Spoken: Y

Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC,
 Provider ID: 624122
 NPI: 1649662719
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC,
 Provider ID: 624122
 NPI: 1316501562
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC,
 Provider ID: 624122
 NPI: 1851300123
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

PEDIATRICS

DELRE, AMANDA
 Provider ID: 238960
 Provider Gender: Female
 NPI: 1548499957
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

1107 S MISSION RD
 FALLBROOK, CA 92028
 Phone: (760) 451-0070
 Fax: (760) 451-1499
 After Hours Phone: (760) 451-0070
 Website: N/A
 Medi-Cal Open Panel: Yes


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Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


PEDIATRICS

LINARES, YENDI

Provider ID: 538068

Provider Gender: Female

NPI: 1336674886

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 1107 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-0070

Fax: (760) 451-1499

 After Hours Phone: (760) 451-0070

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


PEDIATRICS

ROBINSON, DAISY

Provider ID: 230579

Provider Gender: Female

NPI: 1659389740

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760) 723-6200


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-4PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733

 After Hours Phone: (619) 429-3733

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8:30AM-9PM
F 8:30AM-5PM
SA 8:30AM-2PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678


NPI: 1790718351

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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 949 PALM AVE
 IMPERIAL BEACH, CA
 91932
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619)
 429-3733
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

INTERNAL MEDICINE



RYAN, DANA

Provider ID: 179678
 Provider Gender: Female
 License Number: A66830
 NPI: 1780609990
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932
 Phone: (619) 429-3733
 After Hours Phone: (619)
 429-3733
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678
 Provider Gender: Female
 License Number: A51447
 NPI: 1154409035
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Serbian, Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
 IMPERIAL BEACH, CA
 91932
 Phone: (619) 429-3733
 After Hours Phone: (619)
 429-3733
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


JULIAN

CLINIC OUTPATIENT

SAN YSIDRO HEALTH JULIAN



FAMILY MEDICINE,
 Provider ID: 664467

NPI: 1235804139

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 2721 WASHINGTON ST
 JULIAN, CA 92036

 Phone: (619) 662-4100
 Fax: (619) 662-4196

 After Hours Phone: (619)
 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Hours: M-F 8AM-5PM

FAMILY PRACTICE

WYLIE, BLAKE



Provider ID: 664467
 Provider Gender: Male
 License Number: 20A11088
 NPI: 1922314145
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 2721 WASHINGTON ST
 JULIAN, CA 92036

 Phone: (619) 662-4100




 After Hours Phone: (619)

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662-4100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,


Provider ID: 664467
 NPI: 1235804139
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 2721 WASHINGTON ST
 JULIAN, CA 92036
 Phone: (619) 662-4100
 Fax: (619) 662-4196

 After Hours Phone: (619)
 662-4100

 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN


Provider ID: 537752

Provider Gender: Female
 NPI: 1174504757


 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

 7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037


 Phone: (858) 459-4351
 Fax: (858) 459-4399

 After Hours Phone: (858)
 459-4351

 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM
 SA 8AM-0PM

PEDIATRICS


GANDHI, SHEETAL


Provider ID: 282029
 Provider Gender: Female
 NPI: 1700858859


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

 4150 REGENTS PARK ROW
 STE 355


LA JOLLA, CA 92037
 Phone: (858) 457-2043
 Fax: (858) 457-2092

 After Hours Phone: (858)
 457-2043

 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

HUNTER, WENDY


Provider ID: 377597
 Provider Gender: Female
 NPI: 1053515551


 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSF
 BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO


Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

 7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037

 Phone: (858) 459-4351
 Fax: (858) 459-4399


 After Hours Phone: (858)
 459-4351


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 Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


PEDIATRICS

PARSONS, GENEVIEVE

Provider ID: 24122

Provider Gender: Female

NPI: 1699700914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 7300 GIRARD AVE STE 106

LA JOLLA, CA 92037

 Phone: (858) 459-4351

Fax: (858) 459-4399

 After Hours Phone: (858)
459-4351

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): **TUNG, VIVIAN**

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


PEDIATRICS

ROBERTS, KENDALL

Provider ID: 48933

Provider Gender: Male

NPI: 1265762033

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No


RADY CHILDRENS HEALTH

NETWORK


 4150 REGENTS PARK ROW


STE 355

LA JOLLA, CA 92037

 Phone: (858) 457-2043

Fax: (858) 457-2092

 After Hours Phone: (858)
457-2043

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

Provider ID: 11291

Provider Gender: Female

NPI: 1285665133

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 7300 GIRARD AVE STE 106

LA JOLLA, CA 92037

 Phone: (858) 459-4351

Fax: (858) 459-4399

 After Hours Phone: (858)
459-4351

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

LA MESA

CERTIFIED NURSE

PRACTITIONER

WARD, KATHERINE

Provider ID: 613887

Provider Gender: Female

NPI: 1477223576

 Provider English Spoken: Y

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C. دليل الرعاية الأولية

Cultural Competency: N
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM
SA 11:30AM-3:30PM

CERTIFIED NURSE PRACTITIONER

WARD, KATHERINE

Provider ID: 613881

Provider Gender: Female

NPI: 1477223576

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM
SA 11:30AM-3:30PM

FAMILY PRACTICE

PATEL, HEMANSHU

Provider ID: 664660

Provider Gender: Male

NPI: 1255777439

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: BARSTOW
COMMUNITY HOSPITAL,
DESERT VALLEY HOSPITAL,

Providence St Mary Medical
Center, VICTOR VALLEY
GLOBAL MED CTR

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

7339 EL CAJON BLVD STE 1

LA MESA, CA 91942

Phone: (619) 698-0606

Fax: (619) 332-5149

After Hours Phone: (619)
698-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5:30PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 435468

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 7:30AM-6PM
W-F 7:30AM-6:30PM
SA 8:30AM-5PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 451191

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Provider Gender: Female
NPI: 1487746855
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 7:30AM-6PM W-F 7:30AM-6:30PM SA 8:30AM-5PM

PEDIATRICS

CLAY, CORRIE

Provider ID: 536652
Provider Gender: Female
NPI: 1437207750
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT

HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648986
Provider Gender: Female
NPI: 1093343105
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942
 Phone: (619) 464-6434

Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648987
Provider Gender: Female
NPI: 1093343105
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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🕒 Hours: M-F 8AM-6PM
SA 11:30AM-3:30PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 433091

Provider Gender: Female

NPI: 1912193301

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

☎ Phone: (619) 464-6434

Fax: (619) 464-5109

📞 After Hours Phone: (619)
464-6434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 450501

Provider Gender: Female

NPI: 1912193301

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

☎ Phone: (619) 464-6434

📞 After Hours Phone: (619)
464-6434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

IMUS, PAUL

Provider ID: 239590

Provider Gender: Male

NPI: 1104116680

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, GROSSMONT
HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

☎ Phone: (619) 401-0404

Fax: (619) 401-0522

📞 After Hours Phone: (619)
401-0404

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

PEDIATRICS

MOFFATT, KYRRA

Provider ID: 275099

Provider Gender: Female

NPI: 1194922419

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)
401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

MOLINOS, NICOLE

Provider ID: 538098

Provider Gender: Female

NPI: 1538685524

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH
NETWORK

6942 UNIVERSITY AVE STE
A

LA MESA, CA 91942

Phone: (619) 698-2184

Fax: (619) 698-2084

After Hours Phone: (619)
698-2184

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

PEDIATRICS

RONQUILLO, RINA

Provider ID: 377359

Provider Gender: Female

NPI: 1407047749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
RADY CHILDRENS HOSPITAL

SAN DIEGO, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

PEDIATRICS

SHORT, RICHARD

Provider ID: 60736

Provider Gender: Male

NPI: 1568552727

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
RADY CHILDRENS HOSPITAL

SAN DIEGO, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200




LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434


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 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM
 SA 11:30AM-3:30PM

LAKESIDE

CHIROPRACTOR



PAGE, BIANCA




Provider ID: 353843
 Provider Gender: Female
 License Number: DC33688
 NPI: 1649787607
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 10039 VINE ST
 LAKESIDE, CA 92040
 Phone: (858) 218-3000
 After Hours Phone: (858) 218-3000
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE



FERRAILOLO, NATALIE







Provider ID: 353843
 Provider Gender: Female
 License Number: A152372
 NPI: 1306290143
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 10039 VINE ST
 LAKESIDE, CA 92040
 Phone: (858) 218-3000
 After Hours Phone: (858) 218-3000
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843
 Provider Gender: Female
 License Number: A115342
 NPI: 1851602270
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, Mandarin,
 Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 10039 VINE ST
 LAKESIDE, CA 92040
 Phone: (619) 440-2751
 After Hours Phone: (619) 440-2751
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843
 NPI: 1932384120
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 10039 VINE ST
 LAKESIDE, CA 92040
 Phone: (858) 218-3000
 Fax: (360) 462-2744
 After Hours Phone: (858) 218-3000
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

GENERAL PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

MANNINO, ELIZABETH

Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

10039 VINE ST
LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

10039 VINE ST

LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

LEMON GROVE

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933

NPI: 1831557024

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

CERTIFIED NURSE

PRACTITIONER

ARVIZU, PALOMA

Provider ID: 419139

Provider Gender: Female

License Number: NP95008782

NPI: 1689139396

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

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License Number: RN428876

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

Provider ID: 419139

Provider Gender: Female

License Number: NP95001050

NPI: 1578993788

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 419139

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318

NPI: 1285074740

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

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SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466

Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

Fax: (619) 825-9577

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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🕒 Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 7592 BROADWAY

LEMON GROVE, CA 91945

☎️ Phone: (619) 515-2500

🕒 After Hours Phone: (619) 515-2500

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 7592 BROADWAY

LEMON GROVE, CA 91945

☎️ Phone: (619) 515-2550

🕒 After Hours Phone: (619) 515-2550

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 7592 BROADWAY

LEMON GROVE, CA 91945

☎️ Phone: (619) 515-2550

🕒 After Hours Phone: (619) 515-2550

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

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Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

**FOLCHTORRES-AGUIAR,
BEATRIZ**

Provider ID: 419139

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 419139


Provider Gender: Female




License Number: C174771


NPI: 1053392035

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619)*
515-2550

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F 9AM-5PM*

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 419139

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)*
515-2550

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 419139

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)*
515-2550

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 419139

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)*
515-2550

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

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PROVIDER
 Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 419139

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
 515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY


WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,

GROSSMONT HOSPITAL,
 DESERT REGIONAL MED CTR
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
 515-2500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN


Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SHARP CORONADO HOSP
 AND HEALTHCARE CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
 515-2500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

JACKSON, DANA


Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
 Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416

NPI: 1932329505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NATIONAL CITY

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
OPERATION SAMAHAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-6PM
F 8AM-5PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)

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Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
 Provider ID: 185270
 Provider Gender: Female
 License Number: NP95013257
 NPI: 1538707765
 Provider English Spoken: Y
 Provider Language(s) Spoken: Marathi, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE

NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 Fax: (619) 434-7310
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
 Provider ID: 418302
 Provider Gender: Female
 License Number: NP95000203
 NPI: 1093130395
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
 Provider ID: 417102
 Provider Gender: Female
 License Number: NP95000203
 NPI: 1093130395
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-6PM
 F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH
 Provider ID: 418930
 Provider Gender: Female


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License Number: NP95010663
NPI: 1942764477


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL


CTR


Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


OCHOA, ERLINDA


Provider ID: 185270

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.or
g


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

REAL, MARIA


Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Catalan, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.or
g


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

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C. دليل الرعاية الأولية

PRACTITIONER


REID, EMILY

Provider ID: 185270

Provider Gender: Female


License Number: NP95002766

NPI: 1083081467

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308


 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER



VERDUZCO GONZALEZ, AURORA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961


NPI: 1932452323


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308


 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

VILLANUEVADEGUTIE, BERENICE

Provider ID: 185270

Provider Gender: Female


License Number: NP95002188


NPI: 1952795536

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308


 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER


WILLIAMS, BREAUNA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308


 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185270

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Male
 License Number: DC29314
 NPI: 1306916994
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: TH 8AM-2PM

FAMILY PRACTICE

ALGHAMDI, ASMA
 Provider ID: 227418
 Provider Gender: Female
 License Number: A167529
 NPI: 1316310840
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 2400 E 8TH ST STE A
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100

After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

ANDAYA, MIKHAEL
 Provider ID: 418930
 Provider Gender: Male
 License Number: A176878
 NPI: 1780189209
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



BAEZ, BEATRICE
 Provider ID: 417102
 Provider Gender: Female
 License Number: A74777
 NPI: 1245372507
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10AM-7PM
 TH-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA
 Provider ID: 227418
 Provider Gender: Female
 License Number: A157488
 NPI: 1316479892


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


C. دليل الرعاية الأولية


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: CHULA
 VISTA COMM HOSP

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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

 Phone: (619) 662-4100

 After Hours Phone: (619)
 662-4100


 Website: syhealth.org/clinic/s/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE


CANLAS, AVELINO

Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Tagalog


Cultural Competency: N


Hospital Affiliation: PARADISE
 VALLEY HOSPITAL

Board Certified Specialty: No
 OPERATION SAMAHAN

 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
 200-2426

 Website: www.operationsamahan.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-TH 8AM-6PM
 F 8AM-5PM

FAMILY PRACTICE

CARRIEDO-CENICEROS,


MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1136 D AVE
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
 662-4100

 Website: syhealth.org/clinic/s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA


Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1136 D AVE
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
 662-4100

 Website: syhealth.org/clinic/s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY PRACTICE


DILLON, MAYRA


Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE


LANUZA, MARK

Provider ID: 418930

Provider Gender: Male

License Number: 20A18460

NPI: 1992230593


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

FAMILY PRACTICE


LAW, KAREN

Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: CHULA

VISTA COMM HOSP


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

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

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No



IHP OF SOUTHERN CAL-PHP

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






 Phone: (619) 662-4100

 After Hours Phone: (619)





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662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER
 Provider ID: 361428
 Provider Gender: Male
 License Number: A133539
 NPI: 1467714436
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 330 E 8TH ST
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOHAMEDI, NADIA
 Provider ID: 227418
 Provider Gender: Female
 License Number: A146819
 NPI: 1477947364
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 2400 E 8TH ST STE A
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

NAVARRO, VANESSAMARIA
 Provider ID: 227418
 Provider Gender: Female
 License Number: A113624
 NPI: 1952563421
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 2400 E 8TH ST STE A
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 Fax: (619) 259-2807
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON
 Provider ID: 361428
 Provider Gender: Male
 License Number: 20A12653
 NPI: 1508121674
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

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Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NOLASCO, JOANNA
Provider ID: 227412
Provider Gender: Female
License Number: A138919
NPI: 1154749315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA
Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/national-city-family-clinic-1
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RICHARDSON, DANIELLE
Provider ID: 227418
Provider Gender: Female

License Number: A127555
NPI: 1609142892
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROBERTS, POMAI
Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

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Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185270

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

NPI: 1295977353

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

Fax: (619) 259-2806

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270

Provider Gender: Female

License Number: A167184

NPI: 1720583040

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TH 8AM-2PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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C. دليل الرعاية الأولية

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinic/s/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

**FAMILY HEALTH CTR SD
NATIONAL CITY,**

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

Fax: (619) 269-0053

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1801907449

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC

**LA MAESTRA FAMILY CLINIC
INC,**

Provider ID: 185270

NPI: 1336353721

Provider English Spoken: Y
Cultural Competency: N

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TH 8AM-2PM

FQHC

**OPERATION SAMAHAN -
NATIONAL C,**

Provider ID: 417102

NPI: 1801907449

Provider English Spoken: Y
Cultural Competency: N

OPERATION SAMAHAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-6PM
F 8AM-5PM

FQHC

**OPERATION SAMAHAN
GRANGER SCHOOL BASED,**

Provider ID: 418302

NPI: 1205134517

Provider English Spoken: Y
Cultural Competency: N

OPERATION SAMAHAN

2101 GRANGER AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 227412

NPI: 1003869363

☑ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 1136 D AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 474-3722

🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH

PARADISE HILLS,

Provider ID: 227418

NPI: 1598907487

☑ Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428

NPI: 1851757215

☑ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 330 E 8TH ST
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 434-3514

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

🕒 After Hours Phone: (619)
434-7308

🌐 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

BRAVERMAN, IRA

Provider ID: 10635


Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

NPI: 1124039755

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE


VALLEY HOSPITAL

Board Certified Specialty: Yes


IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)
267-8181


 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


INTERNAL MEDICINE


HEKMAT, RAZI

Provider ID: 78388

Provider Gender: Male

NPI: 1871501205

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE


VALLEY HOSPITAL

Board Certified Specialty: No


IMPERIAL HEALTH HOLDINGS


MEDICAL GROUP-SD

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)
267-8181

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

INTERNAL MEDICINE


LAMANTIA, MICHELE


Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

- ☐ Provider English Spoken: Y
- ☐ Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 798-3977

After Hours Phone: (619)
798-3977

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A

NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

BAILONY, MOHAMMED

Provider ID: 30132

Provider Gender: Male

NPI: 1376625913

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

PARADISE VALLEY HOSPITAL,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ Phone: (619) 470-1945

Fax: (619) 475-5048

📞 After Hours Phone: (619) 470-1945

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

PEDIATRICS

BAILONY, AHMAD

Provider ID: 146949

Provider Gender: Male

NPI: 1790914422

🗨 Provider English Spoken: Y

🗨 Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

📍 655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950

☎ Phone: (619) 470-1945

Fax: (619) 475-5048

📞 After Hours Phone: (619)

470-1945

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

PEDIATRICS

BARBADILLO, TERESITA

Provider ID: 84258

Provider Gender: Female

NPI: 1952416695

🗨 Provider English Spoken: Y

🗨 Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

📍 655 EUCLID AVE STE 201 NATIONAL CITY, CA 91950

☎ Phone: (619) 267-8601

Fax: (619) 267-2242

📞 After Hours Phone: (619) 267-8601

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227412

Provider Gender: Male

License Number: C55180

NPI: 1932106986

🗨 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 1136 D AVE NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

📞 After Hours Phone: (619) 662-4100

🌐 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE



Provider ID: 185270

Provider Gender: Female

License Number: A123929

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NPI: 1437444858

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO


Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM


PEDIATRICS


FRESNO, BLANCA

Provider ID: 102433

Provider Gender: Female

NPI: 1346258787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No

RADY CHILDRENS HEALTH


NETWORK

 655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

 Phone: (619) 475-4575

Fax: (619) 475-4578

 After Hours Phone: (619)
475-4575

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU-SA 8AM-5PM

PEDIATRICS


GARCIA, RAFAEL

Provider ID: 84954

Provider Gender: Male

NPI: 1053414086

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN


DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 527-7700

Fax: (619) 527-3226

 After Hours Phone: (619)
527-7700

 Website: N/A

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): **UY, CARMELITA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS


RANA, DEBORAH

Provider ID: 227418

Provider Gender: Female

License Number: G88347


NPI: 1033191457


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, CHULA VISTA COMM HOSP

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


PEDIATRICS

Provider ID: 424443

Provider Gender: Female

NPI: 1154431484

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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

 Phone: (619) 216-8500

Fax: (619) 216-8511

 After Hours Phone: (619) 216-8511


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


PEDIATRICS


VALENCIA, MARILES

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

 Phone: (619) 475-4575

Fax: (619) 475-4578

 After Hours Phone: (619) 475-4575


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: SU-SA 8AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

 Provider English Spoken: Y
Cultural Competency: N

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Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930
 Provider Gender: Female
 License Number: PA55660
 NPI: 1720524374
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185270
 Provider Gender: Female
 License Number: PA20296
 NPI: 1447492889
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185270
 Provider Gender: Female
 License Number: PA21625
 NPI: 1154609790
 Provider English Spoken: Y

Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM

OCEANSIDE

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341
 Provider Gender: Female
 License Number: NP95003571
 NPI: 1053776914
 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean
 Cultural Competency: N
 Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

📞 After Hours Phone: (760) 631-5000
🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

📞 Phone: (760) 631-5000

🕒 After Hours Phone: (760) 631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

📞 Phone: (760) 631-5000

🕒 After Hours Phone: (760) 631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054

📞 Phone: (760) 757-5841

🕒 After Hours Phone: (760) 757-5841

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 2210 MESA DR STE 300

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OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 After Hours Phone: (760) 757-5841

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
 SA 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
 OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
 OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
 OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
 OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206341

N

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206341

N

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male


License Number: NP95017483


NPI: 1679140644

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

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PRACTITIONER

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NPI: 1679140644


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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM SA 9AM-4PM*


CERTIFIED NURSE PRACTITIONER



CHRISTY, TYLER

Provider ID: 206341
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971

 *Provider English Spoken: Y Cultural Competency: N*
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 *4700 N RIVER RD OCEANSIDE, CA 92057*
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CHRISTY, TYLER



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Provider ID: 206341
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American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

CERTIFIED NURSE PRACTITIONER



CORY, ALLISON

Provider ID: 206341
Provider Gender: Female
License Number: NP20497
NPI: 1194027706

 *Provider English Spoken: Y Cultural Competency: N*

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 *4700 N RIVER RD OCEANSIDE, CA 92057*


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Medi-Cal Open Panel: Yes
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American Sign Language (ASL): N

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Provider Gender: Female


License Number: NP20497


NPI: 1194027706

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Cultural Competency: N

Board Certified Specialty: No
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PROVIDER

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CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 206341

Provider Gender: Female

License Number: NP95025094


NPI: 1942952767


Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No
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Min/Max Age: 0\None

American Sign Language (ASL):
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PROVIDER

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EVERETT, ELIZABETH

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NPI: 1942952767


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 Provider Language(s)
Spoken: Sign Language


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

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🕒 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
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CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No

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🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

🕒 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
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📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 517 N HORNE ST
OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

🕒 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 517 N HORNE ST
OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

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C. دليل الرعاية الأولية

PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 206341

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

🗣️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD
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PROVIDER

🕒 Hours: M-F 8AM-5PM
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CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

🗣️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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PROVIDER

 Hours: M-F 8AM-5PM
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CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

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American Sign Language (ASL):
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C. دليل الرعاية الأولية




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


CERTIFIED NURSE PRACTITIONER



TAYLOR, CHRISTOPHER

*Provider ID: 206341
Provider Gender: Male
License Number: NP95020584
NPI: 1851747166*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP*

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American Sign Language (ASL):
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CERTIFIED NURSE PRACTITIONER



TAYLOR, CHRISTOPHER

*Provider ID: 206341
Provider Gender: Male
License Number: NP95020584
NPI: 1851747166*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP*

 *4700 N RIVER RD
OCEANSIDE, CA 92057*
 *Phone: (760) 631-5000*


 *After Hours Phone: (760)
631-5000*
 *Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM
SA 9AM-4PM*


CERTIFIED NURSE PRACTITIONER



WAGNER, TASIA

*Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP*

 *4700 N RIVER RD
OCEANSIDE, CA 92057*
 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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OCEANSIDE, CA 92057

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631-5000

Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

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Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
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631-5000


 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374


NPI: 1831354026


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female


License Number: 20A18374


NPI: 1831354026


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female


License Number: 20A18374

NPI: 1831354026

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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C. دليل الرعاية الأولية

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac


Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434

Provider Gender: Male

License Number: A135564

NPI: 1699038125


Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac


Cultural Competency: N

Hospital Affiliation:


SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org

nityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434

Provider Gender: Male

License Number: A135564

NPI: 1699038125


Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac


Cultural Competency: N


Hospital Affiliation:


SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP




 818 PIER VIEW WAY OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760) 631-5000




 Website: www.vistacommunityclinic.org




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 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT






Provider ID: 206341
 Provider Gender: Male
 License Number: A135564
 NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
 OCEANSIDE, CA 92057
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 After Hours Phone: (760)

631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE







KETCHEL, CLINT

Provider ID: 206341
 Provider Gender: Male
 License Number: A135564
 NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER
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 4700 N RIVER RD
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 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
 Provider Gender: Female
 License Number: 20A21066
 NPI: 1891069662
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341

Provider Gender: Female


License Number: 20A21066


NPI: 1891069662

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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OCEANSIDE, CA 92057

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 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341

Provider Gender: Female

License Number: 20A21066


NPI: 1891069662

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU



Provider ID: 206341



Provider Gender: Male

License Number: A149340

NPI: 1235492760


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 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000




 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PONSFORD, DIANA


Provider ID: 402436
 Provider Gender: Female
 License Number: 20A17371
 NPI: 1407204969
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000







 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436
 Provider Gender: Female
 License Number: 20A17371
 NPI: 1407204969
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP



 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
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 631-5000
 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

SA 9AM-4PM




FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341
 Provider Gender: Female
 License Number: 20A8949
 NPI: 1871791749

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP


 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
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 631-5000

 Website: www.vistacommu-nityclinic.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE



VIDAL, MONICA

Provider ID: 206341
 Provider Gender: Female
 License Number: 20A8949
 NPI: 1871791749

 Provider English Spoken: Y






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C. دليل الرعاية الأولية

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE








VIDAL, MONICA

Provider ID: 206341
 Provider Gender: Female
 License Number: 20A8949
 NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 9AM-4PM

FQHC








TRUECARE,

Provider ID: 480247
 NPI: 1245246917
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

FQHC






VISTA COMMUNITY CLINIC,

Provider ID: 206341
 NPI: 1316501562

 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 9AM-4PM



FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341
 NPI: 1649662719
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,


Provider ID: 206341

NPI: 1851300123

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
 OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,


Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
 OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,


Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
 OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

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

FQHC

VISTA COMMUNITY CLINIC

PIER VIEW WAY,


Provider ID: 402434

NPI: 1629357355

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY
 OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC

PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

 Provider English Spoken: Y
 Cultural Competency: N

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IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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


PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 344145

Provider Gender: Female

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

RADY CHILDRENS HEALTH


NETWORK

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767


 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 891-4667

 After Hours Phone: (760)
891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CALHOUN, CHANELLE


Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 891-4667

 After Hours Phone: (760)
891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CURLEY, EDWARD


Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY




MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300

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OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS


CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

 Provider English Spoken: Y



 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

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


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM


PEDIATRICS

CURLEY, EDWARD

Provider ID: 240736

Provider Gender: Male

NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

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

 After Hours Phone: (760) 736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

DANIELS, SARAH

Provider ID: 433806

Provider Gender: Female

NPI: 1730446527

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL


HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3605 VISTA WAY STE 130
BLDG B

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

 After Hours Phone: (760) 547-1010


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA

Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y

 Provider Language(s)

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Spoken: Hindi, Marathi, Spanish, Telugu
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 818 PIER VIEW WAY OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA
 Provider ID: 402434
 Provider Gender: Female
 License Number: A109056
 NPI: 1932304342
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 818 PIER VIEW WAY OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

KRAMER, MELISSA
 Provider ID: 469759
 Provider Gender: Female
 NPI: 1467833467
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY BLDG B OCEANSIDE, CA 92056
 Phone: (760) 547-1010
 Fax: (760) 547-1011
 After Hours Phone: (760) 547-1010
 Website: N/A

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

PEDIATRICS

MACINTYRE, ELIZABETH
 Provider ID: 543354
 Provider Gender: Female
 NPI: 1336520766
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: Yes RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY BLDG B STE 130 OCEANSIDE, CA 92056
 Phone: (760) 547-1010
 Fax: (760) 547-1011
 After Hours Phone: (760) 547-1010
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

PEDIATRICS

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MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MILLER, DONALD

Provider ID: 433589

Provider Gender: Male

NPI: 1154356582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER,

UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

Phone: (760) 547-1010

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☎ After Hours Phone: (760) 547-1010

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

NOVOTA, GABRIELA

Provider ID: 685653

Provider Gender: Female

NPI: 1154520096

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

☎ After Hours Phone: (760) 736-6767

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

PARK, RONALD

Provider ID: 271889

Provider Gender: Male

NPI: 1881695914

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

☎ After Hours Phone: (760) 736-6767

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

PERKINS, RACHEL

Provider ID: 435952

Provider Gender: Female

NPI: 1427398320

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3605 VISTA WAY STE 130
BLDG B

OCEANSIDE, CA 92056

☎ Phone: (760) 547-1010

☎ After Hours Phone: (760) 547-1010

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353





☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish, Tagalog



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Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None




American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

PEDIATRICS

RONAN, KEVIN





Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS





Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

PEDIATRICS







RONAN, KEVIN

Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000



 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

PEDIATRICS

ZACHRY, ALISON









Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-4:30PM







PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247
 Provider Gender: Female
 License Number: A131678
 NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, TRI CITY MEDICAL CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-4:30PM



PHYSICIANS ASSISTANT





CHISWICK, GARY

Provider ID: 480247
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
 966-3306
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT







CHISWICK, GARY

Provider ID: 480247
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300

OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
 966-3306
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
 Provider Gender: Female
 License Number: PA53036
 NPI: 1922471192
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
 966-3306
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

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Provider ID: 480247
 Provider Gender: Female
 License Number: PA53036
 NPI: 1922471192
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
 966-3306
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

POWAY

FAMILY PRACTICE

KAUR, JATINDER
 Provider ID: 481187
 Provider Gender: Female
 License Number: A120771
 NPI: 1912141391
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Punjabi,
 Urdu
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 13010 POWAY RD

POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
 218-3000
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 481187
 NPI: 1023518768
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858)
 218-3000
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

CURET, ZULMA
 Provider ID: 481187
 Provider Gender: Female
 License Number: A119661
 NPI: 1841561107
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
 218-3000
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

LINDBACK, SARAH
 Provider ID: 161834
 Provider Gender: Female
 NPI: 1427345487
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 HEALTH, SCRIPPS MEMORIAL

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HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

15725 POMERADO RD STE
203

POWAY, CA 92064

Phone: (858) 673-3340

Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

LOSTETTER, ADRIENNE

Provider ID: 261797

Provider Gender: Female

NPI: 1881607984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

15725 POMERADO RD STE
203

POWAY, CA 92064

Phone: (858) 673-3340

Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

MOREIRA, LUCILA

Provider ID: 523761

Provider Gender: Female

NPI: 1104846567

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

15725 POMERADO RD STE
203

POWAY, CA 92064

Phone: (858) 673-3340

Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8AM-5PM

PEDIATRICS

MORTIMER, DORI

Provider ID: 230552

Provider Gender: Female

NPI: 1417928417

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

15725 POMERADO RD STE
203

POWAY, CA 92064

Phone: (858) 673-3340

Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes


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Min/Max Age: 0\19

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

RAMGREN, AILEEN

Provider ID: 397707


Provider Gender: Female

NPI: 1356785505


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 15725 POMERADO RD STE 203

POWAY, CA 92064

 Phone: (858) 673-3340

 After Hours Phone: (858) 673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


PEDIATRICS


RENDLER, NATHAN

Provider ID: 30205

Provider Gender: Male

NPI: 1275531337

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hebrew, Spanish, Yiddish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH


Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 15525 POMERADO RD STE 1 POWAY, CA 92064

 Phone: (858) 487-8333

Fax: (858) 487-0856

 After Hours Phone: (858) 487-8333

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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


PEDIATRICS

TAI, KUANGKAI

Provider ID: 351834

Provider Gender: Male

NPI: 1396744066

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin, Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 15525 POMERADO RD STE B1

POWAY, CA 92064

 Phone: (858) 487-8333

Fax: (858) 487-0856

 After Hours Phone: (858) 484-4003

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM
SA 8:30AM-0PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

Provider ID: 481187

Provider Gender: Female

License Number: PA23310

NPI: 1649692369

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

RAMONA

**CERTIFIED NURSE
PRACTITIONER**

DOAN, CHINH

Provider ID: 449438
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

FQHC

TRUECARE,

Provider ID: 449438
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-0PM

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438
Provider Gender: Female
License Number: A89893
NPI: 1730386863
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER


PEDIATRICS


ZACHRY, ALISON


Provider ID: 449438
Provider Gender: Female
License Number: A131678
NPI: 1922402858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760)

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736-6767

 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
 SA 8AM-0PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST
 RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

Provider ID: 449438
 Provider Gender: Female
 License Number: PA22669
 NPI: 1386741072

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST
 RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 449438
 Provider Gender: Female
 License Number: PA53036
 NPI: 1922471192

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST
 RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767

 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER




PHYSICIANS ASSISTANT


ZANGEN, ROCHELLE

Provider ID: 449438
 Provider Gender: Female
 License Number: PA51494
 NPI: 1447681150

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST
 RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767

 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

SAN DIEGO


CARDIOVASCULAR DISEASE

BLUM, RICHARD

Provider ID: 417937
 Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

License Number: G53758
NPI: 1043310030
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE



GARIBYAN, VARTAN

Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
GREEN HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO







 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-TH 8AM-9PM
F 8AM-5PM

CERTIFIED NURSE PRACTITIONER





AQUINO, FELINO

Provider ID: 418535
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsa


mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO


Provider ID: 432308
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

CERTIFIED NURSE PRACTITIONER


ARTS, SERENA

Provider ID: 403583
 Provider Gender: Female
 License Number: NP10769
 NPI: 1801881552
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP






 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER


Provider ID: 206363
 Provider Gender: Male
 License Number: NP95009292
 NPI: 1386120723
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER


BELTRON, KIMBERLY





Provider ID: 403583
 Provider Gender: Female
 License Number: NP95020497
 NPI: 1871295493
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

BESTERFELDT, LYDIA

Provider ID: 482070
 Provider Gender: Female
 License Number: NP95013060
 NPI: 1265929442
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
 810-8700
 Website: www.sdfamilycare
 .org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER


BURNS, DELLA

Provider ID: 233597
 Provider Gender: Female
 License Number: NP7413
 NPI: 1871577023

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167
Provider Gender: Female
License Number: NP8563
NPI: 1447450275

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org


/clinics/king- chavez- heal
h- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER




 Hours: M-F 8AM-5PM
SA 8AM-4PM


CERTIFIED NURSE PRACTITIONER

CHASE, AVA LOU

Provider ID: 206360
Provider Gender: Female
License Number: NP95000602
NPI: 1164496386

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA

Provider ID: 185268
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Marathi, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER






 Hours: M-F 8AM-6PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

GALLEGOS, CYNTHIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 206360
 Provider Gender: Female
 License Number: NP95016217
 NPI: 1174105589
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER






CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
 Provider ID: 206363
 Provider Gender: Male
 License Number: NP95007000
 NPI: 1932622156
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

GOLDFINGER, SARAH
 Provider ID: 206360
 Provider Gender: Female
 License Number: NP95011313
 NPI: 1134686744
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046
 Provider Gender: Female
 License Number: NP95010517
 NPI: 1346443983
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
 279-0925
 Website: www.sdfamilycare
 .org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER


HA, THU

Provider ID: 482070
 Provider Gender: Female
 License Number: NP95010517
 NPI: 1346443983
 Provider English Spoken: Y

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 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


HA, THU

Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER



HARRINGTON, BARBARA LORRAINE

Provider ID: 185268
Provider Gender: Female
License Number: NP17008
NPI: 1659579134

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-6PM
SA 8AM-2PM

CERTIFIED NURSE



PRACTITIONER

HART, BECKY

Provider ID: 403583
Provider Gender: Female
License Number: NP95025699
NPI: 1316626344

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 645-6405
 After Hours Phone: (619)
645-6405

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN

Provider ID: 417101
Provider Gender: Female
License Number: NP95020046
NPI: 1710632435

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE

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235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1205019510

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HOANG, CHI

Provider ID: 482070

Provider Gender: Female

License Number: NP95004600

NPI: 1902350994

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:30AM-5:30PM
F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206360
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

INSTONE, SUSAN

Provider ID: 482070
Provider Gender: Female
License Number: NP4858

NPI: 1710223268

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

INSTONE, SUSAN

Provider ID: 233532
Provider Gender: Female
License Number: NP4858
NPI: 1710223268

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA AKIKO

Provider ID: 233597

Provider Gender: Female

License Number: NP95002518

NPI: 1922237809

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619)
563-0250

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male

License Number: NP17838

NPI: 1942456124

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 206046
Provider Gender: Female
License Number: NP23847
NPI: 1376840199

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 482070
Provider Gender: Female
License Number: NP23847
NPI: 1376840199

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F

8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

Provider ID: 624977
Provider Gender: Female
License Number: NP95027593
NPI: 1558084855

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
After Hours Phone: (619)
515-2355

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL

Provider ID: 517403
Provider Gender: Female
License Number: NP20849
NPI: 1487889846

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
After Hours Phone: (619)
238-5551
Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 417101
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395

Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426
Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY

Provider ID: 206360
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA

Provider ID: 206363
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN







Provider ID: 214492
Provider Gender: Female
License Number: NP22031
NPI: 1609101997

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1016 OUTER RD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.








 SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619) 429-3733
 Website: www.ibclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5PM
 TU-TH 8:30AM-8PM
 F 8:30AM-5PM

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETTEL MARIE
 Provider ID: 417101
 Provider Gender: Female
 License Number: NP95002233
 NPI: 1245652387
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


MORAN, TIFFANY
 Provider ID: 207382
 Provider Gender: Female
 License Number: NP95011037
 NPI: 1730730649
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG
 G
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
 Provider ID: 185268
 Provider Gender: Female
 License Number: NP95009891
 NPI: 1003166646

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 564-8765
 After Hours Phone: (619) 564-8765
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM
 SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA
 Provider ID: 417101
 Provider Gender: Female
 License Number: NP95020179
 NPI: 1417699869
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 OPERATION SAMAHAN

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10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426
Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 233532
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619)
280-2058

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

Provider ID: 482070
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805

Provider English Spoken: Y
Provider Language(s)
Spoken: Mandarin, Yue
Chinese

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

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OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER






CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206363






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Provider Gender: Female
 License Number: RN810863
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Amharic, Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
 Provider ID: 206360
 Provider Gender: Female
 License Number: NP95000205
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Amharic, Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
 Provider ID: 418535
 Provider Gender: Female
 License Number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN
 RD STE B10 AND B11
 SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
 200-2426
 Website: www.operationsa
 mahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
 Provider ID: 417101
 Provider Gender: Female
 License Number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
 200-2426
 Website: www.operationsa
 mahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-4:30PM



CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
 Provider ID: 206362
 Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية


License Number: NP95001492
NPI: 1073869145


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

Provider ID: 206362

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8AM-5PM

CERTIFIED NURSE PRACTITIONER


OWEN, MICHAEL

Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female

License Number: NP95020636

NPI: 1356083828


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

PATEL, KELLY

Provider ID: 402851

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

License Number: NP95004735
NPI: 1033493747

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2444

🕒 After Hours Phone: (619)
515-2444

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

🕒 After Hours Phone: (858)
810-8700

🌐 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE

Provider ID: 207382

Provider Gender: Female


License Number: NP95014964


NPI: 1215543426

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158


 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY

Provider ID: 482070

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Lao,

Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


QUINTO, CINDY


Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Lao,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058


 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 185268

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL): Provider English Spoken: Y
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ROGERS, TANYA

Provider ID: 417987


Provider Gender: Female


License Number: NP95004443

NPI: 1558710038

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 482070

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 207382

Provider Gender: Female

License Number: NP95026377
NPI: 1619594124

🗣️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 2630 1ST AVE
SAN DIEGO, CA 92103

☎️ Phone: (619) 234-2158

📞 After Hours Phone: (619)
234-2158

🌐 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390
NPI: 1619370475

🗣️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎️ Phone: (858) 279-0925

📞 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390
NPI: 1619370475

🗣️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎️ Phone: (858) 279-0925

📞 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female

License Number: NP2390
NPI: 1619370475

🗣️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎️ Phone: (858) 810-8700

📞 After Hours Phone: (858)
810-8700

🌐 Website: www.sdfamilycare.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER



SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022


NPI: 1225012842


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER


SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM

TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374

NPI: 1730567678




 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


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FAMILY HEALTH CENTERS OF SAN DIEGO


 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SEAMAN, MARY


Provider ID: 206363
 Provider Gender: Female
 License Number: NP10146
 NPI: 1033116652
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO



 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN


Provider ID: 206360
 Provider Gender: Female
 License Number: NP10906
 NPI: 1295750339
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO






 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN


Provider ID: 206360
 Provider Gender: Female
 License Number: RN486421
 NPI: 1295750339

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362
 Provider Gender: Female
 License Number: NP95006792
 NPI: 1730604414
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO


 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): N
License Number: NP95006792
NPI: 1730604414

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


TAYLOR, KAYLA

Provider ID: 417429

Provider Gender: Female


License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525


 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
License Number: NP95005999
NPI: 1316478092

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362


Provider Gender: Female


License Number: NP95006792
NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER



TODD, MIKAYLA

Provider ID: 517998

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER



TRAN, KELLY

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360

Provider Gender: Female

License Number: NP2286

NPI: 1598989261

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

Provider ID: 206360

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619)
515-2422

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 206360

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female

License Number: NP95010814

NPI: 1841758984


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 416831

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1063884864

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 255-9155

🕒 After Hours Phone: (619)
255-9155

🌐 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-6PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

Provider ID: 417937

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSTEIN, YANA

Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Hebrew

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2444

🕒 After Hours Phone: (619)
515-2444

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

TOLMIE, SIMONE

Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

☐ Provider English Spoken: Y

☐ Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
Santa Rosa Memorial Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167
Provider Gender: Female
License Number: DC27523
NPI: 1295278281
Provider English Spoken: Y
Provider Language(s)
Spoken: Turkish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/king-chavez-health-
center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 417101
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426
Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-4:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 418535
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM
 W 10AM-7PM
 TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 417101
 Provider Gender: Male
 License Number: DC15775
 NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

CHIROPRACTOR

HALEY, STEVEN

Provider ID: 185268
 Provider Gender: Male
 License Number: DC25697
 NPI: 1083764484
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619) 280-4213

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185268
 Provider Gender: Male
 License Number: DC29314
 NPI: 1306916994

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619) 280-4213

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268
 Provider Gender: Female
 License Number: DC32800
 NPI: 1871046664

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

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MEDICAL CENTER

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Board Certified Specialty: No
OPERATION SAMAHAN

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM
F 8AM-5PM

CHIROPRACTOR

ROJAS, RICHARD
Provider ID: 417937
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

CHIROPRACTOR

SOSA, DAVID
Provider ID: 417937
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM
F 8AM-5PM

CHIROPRACTOR

SOSA, DAVID
Provider ID: 206363
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO





























4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

TAGHIZADEH, MAJID
Provider ID: 417937
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Persian,
Turkish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

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<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;"><u>CHIROPRACTOR</u></p> <p>TRUONG, VENNES</p> <p><i>Provider ID: 417101</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: DC34907</i></p> <p><i>NPI: 1053919928</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No OPERATION SAMAHAN</i></p> <p> 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126</p> <p> <i>Phone: (844) 200-2426</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p> <i>Website: www.operationsa mahan.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-4:30PM</i></p> <hr/> <p style="text-align: center;"><u>CLINIC OUTPATIENT</u></p> <p>OPERATION SAMAHAN RANCHO PENASQUITOS,</p> <p><i>Provider ID: 418535</i></p> <p><i>NPI: 1699216622</i></p>	<p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>OPERATION SAMAHAN</i></p> <p> 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129</p> <p> <i>Phone: (844) 200-2426</i></p> <p><i>Fax: (858) 695-9074</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p> <i>Website: www.operationsa mahan.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TU 8:30AM-5:30PM</i></p> <p><i>W 10AM-7PM</i></p> <p><i>TH-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;"><u>DERMATOLOGY</u></p> <p>BURROWS, WILLIAM</p> <p><i>Provider ID: 417937</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: G16236</i></p> <p><i>NPI: 1639199292</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL</i></p> <p><i>Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</i></p>	<p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> <i>Phone: (619) 515-2545</i></p> <p> <i>After Hours Phone: (619) 515-2545</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><u>DERMATOLOGY</u></p> <p>CARTER, NATASHA</p> <p><i>Provider ID: 206363</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A140912</i></p> <p><i>NPI: 1033539184</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i></p> <p><i>Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102</p> <p> <i>Phone: (619) 515-2560</i></p> <p> <i>After Hours Phone: (619) 515-2560</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

♿ Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

📞 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

📞 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-7PM

TU-TH 8AM-6PM

F 8AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

CHANG, AMY

Provider ID: 206360

Provider Gender: Female

License Number: A93385

NPI: 1750568911

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL HOSPITAL ENCINITAS,

SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

📞 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 515-2510

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

HOSEIN, NADEEN

Provider ID: 417937

Provider Gender: Female

License Number: A113255

NPI: 1912051715

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 206363

Provider Gender: Female

License Number: A149552

NPI: 1750780516

Provider English Spoken: Y

Provider Language(s)

Spoken: Bengali, Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

LEVINE, MATTHEW

Provider ID: 206360

Provider Gender: Male

License Number: A77126

NPI: 1801994231

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

LORENZO, PATRICIA

Provider ID: 206360

Provider Gender: Female

License Number: A129599

NPI: 1487913315

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

MCCALLUM, JAMES

Provider ID: 206360
Provider Gender: Male
License Number: A55708
NPI: 1609838994
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM
F 8:30AM-5PM
SA 8:30AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360
Provider Gender: Female
License Number: A146838
NPI: 1720474141
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

Provider ID: 206360
Provider Gender: Female
License Number: A50477
NPI: 1922105964
Provider English Spoken: Y
Provider Language(s) Spoken: Greek
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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American Sign Language (ASL): NPI: 1588197826

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363
 Provider Gender: Male
 License Number: 20A15471
 NPI: 1649699968
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
 Provider Gender: Male
 License Number: A157505

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

Website: https://www.syhealth.org/locations
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 417937
 Provider Gender: Female
 License Number: 20A15459
 NPI: 1225442643

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417937
 Provider Gender: Male
 License Number: A163977
 NPI: 1942705637

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO



4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):


N



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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8AM-9PM
F 8AM-5PM*

FAMILY PRACTICE

BAGINGITO, AUSTIN


*Provider ID: 206360
 Provider Gender: Male
 License Number: A163977
 NPI: 1942705637*
 *Provider English Spoken: Y
 Cultural Competency: N*
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None*


American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE



BAGINGITO, AUSTIN

*Provider ID: 417429
 Provider Gender: Male
 License Number: A163977
 NPI: 1942705637*
 *Provider English Spoken: Y
 Cultural Competency: N*

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO



 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 *Phone: (619) 515-2525*
 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
 8:30AM-5:30PM*

FAMILY PRACTICE

BAHRAMZI, MARIA

*Provider ID: 417987
 Provider Gender: Female
 License Number: A173486
 NPI: 1588141865*
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pashto*
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO



 4874 POLK AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 515-2426*
 *After Hours Phone: (619) 515-2426*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes




Min/Max Age: 0\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

BAHRAMZI, MARIA

*Provider ID: 206362
 Provider Gender: Female
 License Number: A173486
 NPI: 1588141865*
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pashto*
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST
 SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



FAMILY PRACTICE

BAHRAMZI, MARIA

*Provider ID: 206362
 Provider Gender: Female
 License Number: A173486*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1588141865


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 645-6405

 After Hours Phone: (619)
645-6405


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female

License Number: A165398

NPI: 1730684200

 Provider English Spoken: Y

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Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733

Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 206363
Provider Gender: Male
License Number: A164879
NPI: 1811491749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 417937
Provider Gender: Male
License Number: A164879
NPI: 1811491749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM
F 8AM-5PM

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583
Provider Gender: Female
License Number: C53121
NPI: 1952390437
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851
Provider Gender: Male
License Number: C53623
NPI: 1346337904
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 206360
Provider Gender: Male
License Number: A148499
NPI: 1013399559
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167
Provider Gender: Female
License Number: A157488
NPI: 1316479892
Provider English Spoken: Y
Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4194
After Hours Phone: (619)
662-4194

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPOS, PRISCILLA

Provider ID: 206360
Provider Gender: Female
License Number: A152651
NPI: 1508217399

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101

☑ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 4094 4TH AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHUN, HYUN

Provider ID: 206360

Provider Gender: Male

License Number: A163978

NPI: 1083118988

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 1809 NATIONAL AVE

SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 4094 4TH AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU-SA 8AM-9PM

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 3544 30TH ST

SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

☎ After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU-SA
8:30AM-5:30PM

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

🕒 After Hours Phone: (619)
515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU-SA
8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 402851

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2444

🕒 After Hours Phone: (619)
515-2444

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DAPPEN, AMANDA

Provider ID: 227409

Provider Gender: Female

License Number: A153414

NPI: 1689037111

☑ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FAMILY PRACTICE

DAVIS, DEIRDRE

Provider ID: 451167

Provider Gender: Female

License Number: A165432

NPI: 1265921365

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100



🌐 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM SA 8AM-4PM**

FAMILY PRACTICE

DOSCAS, MICHELLE



Provider ID: 206360
Provider Gender: Female
License Number: A163633
NPI: 1306343421
 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO





 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 **Phone: (619) 515-2300**
 **After Hours Phone: (619) 515-2300**
 **Website: www.fhcsd.org**
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N
 **Accessibility: CONTACT PROVIDER**

FAMILY PRACTICE

FAMBRO, CYNTHIA


Provider ID: 451167
Provider Gender: Female
License Number: A153223
NPI: 1710331707
 **Provider English Spoken: Y**
 **Provider Language(s) Spoken: Spanish**


Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 **Phone: (619) 662-4100**
 **After Hours Phone: (619) 662-4100**
 **Website: www.syhealth.org /clinics/king-chavez-health-center**
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N
 **Accessibility: CONTACT PROVIDER**



FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937
Provider Gender: Male
License Number: A171135
NPI: 1033647409
 **Provider English Spoken: Y**
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO







 4094 4TH AVE

SAN DIEGO, CA 92103
 **Phone: (619) 515-2545**
 **After Hours Phone: (619) 515-2545**
 **Website: www.fhcsd.org**
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):






























N
 **Accessibility: CONTACT PROVIDER**
 **Hours: M-TH 8AM-9PM F 8AM-5PM**

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597
Provider Gender: Female
License Number: A112176
NPI: 1710140462
 **Provider English Spoken: Y**
 **Provider Language(s) Spoken: Spanish**
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4290 POLK AVE
 SAN DIEGO, CA 92105
 **Phone: (619) 563-0250**
 **After Hours Phone: (619) 563-0250**
 **Website: www.sdfamilycare.org**
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>GLEASON ROHRER, GWEN <i>Provider ID: 233532</i> <i>Provider Gender: Female</i> <i>License Number: A112176</i> <i>NPI: 1710140462</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD MEDICAL CTR</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  <i>Phone: (619) 280-2058</i>  <i>After Hours Phone: (619) 280-2058</i>  <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\22</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>GRIFFITHS, KENNETH <i>Provider ID: 417937</i> <i>Provider Gender: Male</i></p>	<p><i>License Number: C52451</i> <i>NPI: 1760563068</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD MEDICAL CTR</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103  <i>Phone: (619) 515-2545</i>  <i>After Hours Phone: (619) 515-2545</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-TH 8AM-9PM F 8AM-5PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>GUTIERREZ, TANIA <i>Provider ID: 417987</i> <i>Provider Gender: Female</i> <i>License Number: 20A19345</i> <i>NPI: 1285196311</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p>	<p> 4874 POLK AVE SAN DIEGO, CA 92105  <i>Phone: (619) 515-2426</i>  <i>After Hours Phone: (619) 515-2426</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>HAMILTON, LISA MARIE <i>Provider ID: 206363</i> <i>Provider Gender: Female</i> <i>License Number: 20A14772</i> <i>NPI: 1235576059</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102  <i>Phone: (619) 515-2560</i>  <i>After Hours Phone: (619) 515-2560</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

🕒 Hours: M-F
8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

🗨️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎️ Phone: (619) 515-2454

🕒 After Hours Phone: (619)
515-2454

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FAMILY PRACTICE

HEINRICI, ALEKA

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

☎️ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿️ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

HENDRIX, JEFFERSON

Provider ID: 631494

Provider Gender: Male

License Number: A32571

NPI: 1235142738

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

☎️ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿️ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎️ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿️ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes























Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>PROVIDER</p> <hr/> <p>FAMILY PRACTICE</p> <p>LACH, REBECCA Provider ID: 206362 Provider Gender: Female License Number: A177922 NPI: 1679137780</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 3544 30TH ST SAN DIEGO, CA 92104  Phone: (619) 515-2424  After Hours Phone: (619) 515-2424  Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <hr/> <p>FAMILY PRACTICE</p> <p>LACH, REBECCA Provider ID: 417937 Provider Gender: Female License Number: A177922 NPI: 1679137780</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish</p>	<p>Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103  Phone: (619) 515-2545  After Hours Phone: (619) 515-2545  Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-TH 8AM-9PM F 8AM-5PM</p> <hr/> <p>FAMILY PRACTICE</p> <p>LEE, SANDRINE Provider ID: 206362 Provider Gender: Female License Number: 20A15068 NPI: 1073909651</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: French Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 3544 30TH ST SAN DIEGO, CA 92104  Phone: (619) 515-2424  After Hours Phone: (619) 515-2424  Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <hr/> <p>FAMILY PRACTICE</p> <p>LINDEMAN, KURTIS Provider ID: 403583 Provider Gender: Male</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <hr/> <p>FAMILY PRACTICE</p> <p>LEE, SANDRINE Provider ID: 206362 Provider Gender: Female License Number: 20A15068 NPI: 1073909651</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: French Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 3544 30TH ST SAN DIEGO, CA 92104  Phone: (619) 515-2424  After Hours Phone: (619) 515-2424  Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <hr/> <p>FAMILY PRACTICE</p> <p>LINDEMAN, KURTIS Provider ID: 403583 Provider Gender: Male</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: A104052
 NPI: 1124155791
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

LISH, JONATHAN
 Provider ID: 206360
 Provider Gender: Male
 License Number: A177373
 NPI: 1811459456
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE
 Provider ID: 206363
 Provider Gender: Female
 License Number: A165872
 NPI: 1053816496
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LU, JULIE
 Provider ID: 418142
 Provider Gender: Female
 License Number: 20A14804
 NPI: 1619210614
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

5160 FEDERAL BLVD
 SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
 Provider ID: 206360
 Provider Gender: Female
 License Number: A161682
 NPI: 1841726148
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925
After Hours Phone: (858)
279-0925

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
License Number: C174985
NPI: 1023437704

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C. دليل الرعاية الأولية


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 206046


Provider Gender: Male


License Number: C174985

NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 206046


Provider Gender: Male


License Number: C174985

NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE


MCLAUGHLIN, ERIK

Provider ID: 207382


Provider Gender: Male


License Number: C176574


NPI: 1861637217

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
Indian Health Services: Y

FAMILY PRACTICE



MELGAR, MONICA

Provider ID: 402851

Provider Gender: Female

License Number: A154399

NPI: 1629432174







 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N




Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

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 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W
 8:30AM-5:30PM
 TH 9AM-6PM
 F 8:30AM-5:30PM






FAMILY PRACTICE

MORALES, ALEJANDRA
 Provider ID: 227409
 Provider Gender: Female
 License Number: A162332
 NPI: 1063945657
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA
 Provider ID: 631494
 Provider Gender: Female
 License Number: A113624
 NPI: 1952563421
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Filipino, Spanish,
 Tagalog
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR





Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1666 PRECISION PARK LN
 SAN DIEGO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE



NGUYEN, NGOC
 Provider ID: 517998
 Provider Gender: Male

License Number: A74094
 NPI: 1184668105

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

NGUYEN CLEARY, THAI
 Provider ID: 417937
 Provider Gender: Male
 License Number: A86079
 NPI: 1467442624
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Hospital Affiliation:
 HOLLYWOOD PRESBYTERIAN
 MED CTR

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Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 206360
Provider Gender: Male
License Number: A146111
NPI: 1174905871

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi

Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544

NPI: 1184773673
Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Board Certified Specialty: No
OPERATION SAMAHAN

9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

ORTIZ, KENNETH







Provider ID: 517403
Provider Gender: Male
License Number: A156607
NPI: 1356761571

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP





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 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

PAYAMI, MADDIHA



Provider ID: 417429
 Provider Gender: Female
 License Number: 20A14012
 NPI: 1336484104
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F



8:30AM-5:30PM

FAMILY PRACTICE

PEREZ, PERLITA



Provider ID: 206363
 Provider Gender: Female
 License Number: A119689
 NPI: 1174810972
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560





 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

POSADA, SEAN



Provider ID: 206360
 Provider Gender: Male
 License Number: A180171
 NPI: 1295100691
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583
 Provider Gender: Male
 License Number: A82123
 NPI: 1194814277
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): *Cultural Competency: N*
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RAGUVEER, VISHAKA


Provider ID: 618164


Provider Gender: Female

NPI: 1740609387

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 9995 CARMEL MOUNTAIN RD STE 10-11B
SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

Fax: (858) 240-6470


 *After Hours Phone: (844) 200-2426*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

FAMILY PRACTICE


RAGUVEER, VISHAKA

Provider ID: 418535


Provider Gender: Female


License Number: A172736


NPI: 1740609387


 *Provider English Spoken: Y*

Board Certified Specialty: No
OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129

 *Phone: (916) 419-7292*

 *After Hours Phone: (916) 419-7292*


 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TU 8:30AM-5:30PM*
W 10AM-7PM

TH-F 8:30AM-5:30PM

FAMILY PRACTICE


RAMIREZ, CRISTHIAN

Provider ID: 206360

Provider Gender: Female

License Number: 20A17478

NPI: 1407200942


 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113


 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8AM-7PM*
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

RIDGE, NEAL

Provider ID: 631494

Provider Gender: Male


License Number: 20A6920


NPI: 1053381004

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 *Phone: (619) 662-4100*

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

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


RITTER, STEVEN

Provider ID: 451167

Provider Gender: Male


License Number: 20A7435


NPI: 1356556021


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


RODRIGUEZ, SEAN


Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE


RODRIGUEZ, LOUIE

Provider ID: 417937

Provider Gender: Male

License Number: A176144

NPI: 1558823625


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 206360

Provider Gender: Male

License Number: A176144

NPI: 1558823625


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSADO, IVAN


Provider ID: 517403

Provider Gender: Male


License Number: A169434

NPI: 1316479603

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 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


ROSENBAUM, HERBERT

Provider ID: 631494

Provider Gender: Male

License Number: A169694

NPI: 1922532712


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SCHUMAKER, EDWARD

Provider ID: 185268

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619)
255-9155


 Website: www.lamaestra.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male


License Number: A162946


NPI: 1457887911

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female


License Number: A160489


NPI: 1558897009

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A163512

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SHEIKH, ZARA


Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s) Spoken: Urdu


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058


 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


SHEIKH, ZARA


Provider ID: 233597

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s) Spoken: Urdu


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


SHIRAKI, JEAN

Provider ID: 417987

Provider Gender: Female

License Number: 20A17577

NPI: 1144684382

 Provider English Spoken: Y

 Provider Language(s) Spoken: Japanese


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 5160 FEDERAL BLVD

SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619) 515-2454


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):





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N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES


Provider ID: 356145
 Provider Gender: Male
 License Number: A97036
 NPI: 1245490358
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO


 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 Phone: (619) 515-2435
 After Hours Phone: (619) 515-2435
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 206360
 Provider Gender: Male
 License Number: A97036
 NPI: 1245490358
 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO



 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM

FAMILY PRACTICE

SNYDER, CHRISTOPHER



Provider ID: 517998
 Provider Gender: Male
 License Number: 20A7502
 NPI: 1922041235

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PIH
 Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583
 Provider Gender: Female
 License Number: A157547
 NPI: 1013441203
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

THAI, JUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A177462

NPI: 1093276198


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

THAI, JUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A177462

NPI: 1093276198


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

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☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023

NPI: 1326453119

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4874 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 515-2426

☎ After Hours Phone: (619) 515-2426

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

☎ After Hours Phone: (619) 563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, UYEN THAO

Provider ID: 206360

Provider Gender: Female

License Number: A76709

NPI: 1891720355

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 795-2756

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N



Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2400

☎ After Hours Phone: (619)


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515-2400
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782
 Provider Gender: Female
 License Number: 20A19610
 NPI: 1629637285
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO






 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619) 515-2430
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363



Provider Gender: Female
 License Number: A161373
 NPI: 1346776358
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO


 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VILLA, MARIA





Provider ID: 107710
 Provider Gender: Female
 NPI: 1861541385
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

 655 SATURN BLVD STE J
 SAN DIEGO, CA 92154
 Phone: (619) 575-4442



Fax: (619) 575-1297
 After Hours Phone: (619) 575-4442
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583
 Provider Gender: Female
 License Number: A109828
 NPI: 1154554871
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5:30PM*

FAMILY PRACTICE







WHITE, KATHERINE

Provider ID: 227409
Provider Gender: Female
License Number: A120447
NPI: 1801112925
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 *3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


WU, JENNIFER


Provider ID: 403583
Provider Gender: Female
License Number: A54702

NPI: 1215953013
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Mandarin, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 *1501 IMPERIAL AVE SAN DIEGO, CA 92101*
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5PM*

FAMILY PRACTICE







ZAHLER, MARVIN

Provider ID: 417937
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
 *4094 4TH AVE SAN DIEGO, CA 92103*
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


ZINK, IRENE

Provider ID: 227409
Provider Gender: Female
License Number: C54198
NPI: 1215959549
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: German*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 *3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

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N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,


Provider ID: 206363

NPI: 1982747671

 **Provider English Spoken: Y Cultural Competency: N**


FAMILY HEALTH CENTERS OF SAN DIEGO

 4725 MARKET ST
SAN DIEGO, CA 92102

 **Phone: (619) 515-2560**

Fax: (619) 263-2499

 **After Hours Phone: (619) 515-2560**

 **Website: www.fhcsd.org**
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,


Provider ID: 417782

NPI: 1588901045


 **Provider English Spoken: Y Cultural Competency: N**


FAMILY HEALTH CENTERS OF SAN DIEGO

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 **Phone: (619) 515-2430**

Fax: (619) 578-2410

 **After Hours Phone: (619) 515-2430**


 **Website: www.fhcsd.org**
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

FQHC

FAMILY HEALTH CTR IBARRA,


Provider ID: 417987

NPI: 1477953933

 **Provider English Spoken: Y Cultural Competency: N**


FAMILY HEALTH CENTERS OF SAN DIEGO

 4874 POLK AVE
SAN DIEGO, CA 92105

 **Phone: (619) 515-2426**

Fax: (619) 255-8002

 **After Hours Phone: (619) 515-2426**


 **Website: www.fhcsd.org**
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**


 **Hours: M-F 8:30AM-5:30PM**

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,


Provider ID: 419167

NPI: 1316419070

 **Provider English Spoken: Y Cultural Competency: N**


FAMILY HEALTH CENTERS OF SAN DIEGO

 140 ELM ST
SAN DIEGO, CA 92101

 **Phone: (619) 515-2520**

Fax: (619) 231-0431

 **After Hours Phone: (619) 515-2520**


 **Website: www.fhcsd.org**
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 418142

NPI: 1336525906

 **Provider English Spoken: Y Cultural Competency: N**

FAMILY HEALTH CENTERS OF SAN DIEGO

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 **Phone: (619) 515-2454**

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Fax: (619) 794-2696

☎ After Hours Phone: (619) 515-2454

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 664747

NPI: 1336525906

☑ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 2114 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2406

☎ After Hours Phone: (619) 515-2406

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782

☑ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

☎ Phone: (619) 515-2422

Fax: (619) 269-0053

☎ After Hours Phone: (619) 515-2422

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429

NPI: 1356750376

☑ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

☎ Phone: (619) 515-2525

Fax: (619) 501-5814

☎ After Hours Phone: (619) 515-2525

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701

☑ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2444

Fax: (858) 488-1394

☎ After Hours Phone: (619) 515-2444

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-W
8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

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<p style="text-align: center;">FQHC</p> <p>FAMILY HLTH CTR SD HILLCREST, Provider ID: 417937 NPI: 1629456900 Provider English Spoken: Y Cultural Competency: N FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103 Phone: (619) 515-2545 Fax: (619) 501-9645 After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-TH 8AM-9PM F 8AM-5PM</p>	<p>Fax: (619) 205-1952 After Hours Phone: (619) 662-4100 Website: www.syhealth.org /clinics/king- chavez- health- center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM SA 8AM-4PM</p>	<p style="text-align: center;">FQHC</p> <p>LINDA VISTA HEALTH CARE CTR, Provider ID: 206046 NPI: 1609905215 Provider English Spoken: Y Cultural Competency: N IHP OF SOUTHERN CAL-PHP 6973 LINDA VISTA RD SAN DIEGO, CA 92111 Phone: (858) 279-0925 Fax: (858) 633-4680 After Hours Phone: (858) 279-0925 Website: www.sdfamilycare.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM</p>
<p style="text-align: center;">FQHC</p> <p>KING CHAVEZ HEALTH CENTER, Provider ID: 451167 NPI: 1538262092 Provider English Spoken: Y Cultural Competency: N IHP OF SOUTHERN CAL-PHP 950 S EUCLID AVE SAN DIEGO, CA 92114 Phone: (619) 662-4100</p>	<p style="text-align: center;">FQHC</p> <p>LA MAESTRA FAMILY CLINIC INC, Provider ID: 185268 NPI: 1336353721 Provider English Spoken: Y Cultural Competency: N LA MAESTRA FAMILY CLINIC 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105 Phone: (619) 280-4213 Fax: (619) 795-9849 After Hours Phone: (619) 280-4213 Website: www.lamaestra.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM</p>	<p style="text-align: center;">FQHC</p> <p>LINDA VISTA HEALTH CARE CTR, Provider ID: 206046 NPI: 1780665877 Provider English Spoken: Y Cultural Competency: N IHP OF SOUTHERN CAL-PHP 6973 LINDA VISTA RD SAN DIEGO, CA 92111 Phone: (858) 279-0925</p>

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Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977

NPI: 1447281936

☑ Provider English Spoken: Y Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 2204 NATIONAL AVE SAN DIEGO, CA 92113

☎ Phone: (619) 515-2355 Fax: (619) 232-7011

☎ After Hours Phone: (619) 515-2355

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY

HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

☑ Provider English Spoken: Y Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 1809 NATIONAL AVE SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300 Fax: (619) 234-2447

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597

NPI: 1962483040

☑ Provider English Spoken: Y Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 4290 POLK AVE SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250 Fax: (858) 633-4681

☎ After Hours Phone: (619) 563-0250

🌐 Website: www.sdfamilycare.org

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532

NPI: 1962483040

☑ Provider English Spoken: Y Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058 Fax: (858) 633-4682

☎ After Hours Phone: (619) 280-2058

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

NESTOR COMMUNITY HEALTH

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CENTER,

Provider ID: 214492

NPI: 1215246996

☐ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 1016 OUTER RD
SAN DIEGO, CA 92154

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

📞 After Hours Phone: (619)
429-3733

🌐 Website: www.ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3514 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 683-7586

📞 After Hours Phone: (619)

515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627

📞 After Hours Phone: (619)
515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1184169963

☐ Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627

📞 After Hours Phone: (619)
515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 432308

NPI: 1861933897

☐ Provider English Spoken: Y
Cultural Competency: N

OPERATION SAMAHAN

📍 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

☎ Phone: (844) 200-2426

Fax: (858) 536-8034

📞 After Hours Phone: (844)
200-2426

🌐 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL): OPERATION SAMAHAN

N

♿ Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101

NPI: 1871680397

☐ Provider English Spoken: Y
Cultural Competency: N

OPERATION SAMAHAN

📍 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (858) 578-4417

🕒 After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-4:30PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622

☐ Provider English Spoken: Y
Cultural Competency: N

📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129

☎ Phone: (844) 200-2426

Fax: (858) 695-9074

🕒 After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382

NPI: 1003902917

☐ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 2630 1ST AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 234-2158

Fax: (619) 234-0206

🕒 After Hours Phone: (619) 234-2158

🌐 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

Indian Health Services: Y

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

☐ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 810-8700

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER


🕒 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FQHC


SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1598308926
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP

 316 25TH ST
 SAN DIEGO, CA 92102

 Phone: (619) 238-5551

Fax: (619) 238-3807

 After Hours Phone: (619)
 238-5551

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

FQHC


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


Provider ID: 227409

NPI: 1326225632

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
 662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

FQHC

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


Provider ID: 517998

NPI: 1205477841

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619)
 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

FQHC


**SAN YSIDRO HEALTH
 PRECISION PARK,**


Provider ID: 631494

NPI: 1124782685

 Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN
 SAN DIEGO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
 662-4100

 Website: www.syhealth.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

FQHC

**SHERMAN HEIGHTS FAMILY
 HLTH CTRS INC,**


Provider ID: 356145

NPI: 1174549232

 Provider English Spoken: Y
 Cultural Competency: N

FAMILY HEALTH CENTERS OF
 SAN DIEGO

 2391 ISLAND AVE
 SAN DIEGO, CA 92102

 Phone: (619) 515-2435

Fax: (619) 515-2435

 After Hours Phone: (619)
 515-2435

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 403583

NPI: 1659415131

☐ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 233-8500

Fax: (619) 687-1067

🕒 After Hours Phone: (619)
233-8500

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5:30PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, CALIFORNIA

PACIFIC MED CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Faroese, Hindi,
Spanish, Telugu, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male

License Number: A159324

NPI: 1639523228

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-9PM

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F 8AM-5PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937

Provider Gender: Female

License Number: A104647

NPI: 1467642215

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL, SCRIPPS
GREEN HOSPITAL

Board Certified Specialty: No
OPERATION SAMAHAN

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-4:30PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

RECALDE, FRANCISCO

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

3811 EL CAJON BLVD

SAN DIEGO, CA 92105

Phone: (619) 284-5622

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Fax: (619) 566-4655

📞 After Hours Phone: (619) 507-3050

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): Provider Gender: Male

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

GENERAL PRACTICE

RECALDE, FRANCISCO

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

📄 Provider English Spoken: Y

📄 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

📞 Phone: (619) 284-5622

Fax: (619) 566-4655

🕒 After Hours Phone: (619) 507-3050

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A122238

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8:30AM-5PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185268

License Number: G45632

NPI: 1548281322

📄 Provider English Spoken: Y

📄 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

📞 Phone: (619) 255-9155

🕒 After Hours Phone: (619) 255-9155

🌐 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

📄 Provider English Spoken: Y

📄 Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

📞 Phone: (619) 515-2300

🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

📄 Provider English Spoken: Y

📄 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO



📍 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113

📞 Phone: (619) 515-2422

🕒 After Hours Phone: (619)







515-2422

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 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 451167
 Provider Gender: Female
 License Number: A101017
 NPI: 1073650339
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER



INTERNAL MEDICINE

ANDERSON, KENDELL







Provider ID: 417937
 Provider Gender: Female
 License Number: 20A15598
 NPI: 1285028191
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ANDREWS, JOHN







Provider ID: 403583
 Provider Gender: Male
 License Number: G71080
 NPI: 1003164302
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
 Provider Gender: Female
 License Number: 20A19248
 NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

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 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female

License Number: 20A19248

NPI: 1124521901


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

*Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17702


NPI: 1841794344


Provider English Spoken: Y

Cultural Competency: N

*Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937

Provider Gender: Female

License Number: A80153

NPI: 1962517367


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

*Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*


 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-9PM
F 8AM-5PM*

INTERNAL MEDICINE

CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352

NPI: 1104480912


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

*Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*


 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-9PM
F 8AM-5PM*

INTERNAL MEDICINE

CHANDRADAS, SAJIV

Provider ID: 417937

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C. دليل الرعاية الأولية

Provider Gender: Male
License Number: A122474
NPI: 1720350465
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE



CHEN, JAMES





Provider ID: 417937
Provider Gender: Male
License Number: A86644
NPI: 1265495691
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE




CSAPOCZI, PETER

Provider ID: 451167
Provider Gender: Male
License Number: A96919
NPI: 1841357118
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/king-chavez-health-
center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-4PM

INTERNAL MEDICINE

CUMMINS, ANDREW

Provider ID: 417937
Provider Gender: Male
License Number: A102764
NPI: 1699917096
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

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 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female


License Number: A187390

NPI: 1699138115

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

 Provider English Spoken: Y

 Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A21421

NPI: 1932785367

 Provider English Spoken: Y


 Provider Language(s)

Spoken: Hindi


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): Provider ID: 417937

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

DODGE, JOHN

Provider ID: 417937

Provider Gender: Male

License Number: G67831

NPI: 1770510489

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider Gender: Male

License Number: A154708

NPI: 1972917672

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

FABELLA, GABRIEL

Provider ID: 9774

Provider Gender: Male

NPI: 1124060827

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Japanese, Spanish,
Tagalog

Cultural Competency: N

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126

☎ Phone: (858) 695-1262

Fax: (858) 695-2132

🕒 After Hours Phone: (858)
695-1262

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-3PM

INTERNAL MEDICINE

FARASAT, SADAF

Provider ID: 206360

Provider Gender: Female

License Number: A147939

NPI: 1255696407

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, NATIVIDAD MEDICAL

CENTER, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

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1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GEHR, MARC

Provider ID: 417937

Provider Gender: Male

License Number: G67338

NPI: 1306800180

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female

License Number: A169752

NPI: 1043742588

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116

NPI: 1982180329

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619) 563-0250

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

HAN, PAUL

Provider ID: 417937

Provider Gender: Male

License Number: A116816

NPI: 1053553339

Provider English Spoken: Y
Provider Language(s) Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

📞 After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

🗨️ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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

📞 Phone: (619) 515-2430

📞 After Hours Phone: (619) 515-2430

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324

NPI: 1447678834

🗨️ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

📞 Phone: (619) 515-2545

📞 After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420

NPI: 1114955879

🗨️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

📞 Phone: (619) 515-2545

📞 After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

JACKSON, GAVIN

Provider ID: 417937

Provider Gender: Male

License Number: A110647

NPI: 1609033182

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 4094 4TH AVE
SAN DIEGO, CA 92103

📞 Phone: (619) 515-2545

📞 After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org

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C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356


NPI: 1285830505

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

KARCHES, KELLI

Provider ID: 417937

Provider Gender: Female

License Number: A80931


NPI: 1891997631


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE


KHANNA, POORNIMA

Provider ID: 185268

Provider Gender: Female

License Number: A70714


NPI: 1598862583

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female


License Number: A67762


NPI: 1932278710

 Provider English Spoken: Y
Cultural Competency: N



Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101




 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500







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 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM


INTERNAL MEDICINE




LALITHAKUMARI, ARYA
 Provider ID: 206362
 Provider Gender: Female
 License Number: A140646
 NPI: 1265874010
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Hemet
 Global Medical Center, Menifee
 Global Medical Center
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE






LALITHAKUMARI, ARYA
 Provider ID: 206362
 Provider Gender: Female
 License Number: A140646
 NPI: 1265874010
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Hemet
 Global Medical Center, Menifee
 Global Medical Center
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE
 Provider ID: 451167
 Provider Gender: Female
 License Number: G71855
 NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 /clinics/king- chavez- healt
 h- center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE


LEE, MICHAEL
 Provider ID: 206360
 Provider Gender: Male
 License Number: A71671
 NPI: 1760406649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS GREEN HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


MARCINIAK, ROMAN

Provider ID: 206360


Provider Gender: Male


License Number: 20A17072

NPI: 1326579210

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 482070

Provider Gender: Male

License Number: A119010

NPI: 1609095264


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937

Provider Gender: Female

License Number: G80358

NPI: 1841252533

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA

Provider ID: 206363

Provider Gender: Female

License Number: A126958

NPI: 1336346972

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185268

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM
SA 8AM-2PM

INTERNAL MEDICINE

SASSIC, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: A185024

NPI: 1598342529

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org


Medi-Cal Open Panel: Yes


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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE


SHAMSINEJAD BABAKI, ARASH


Provider ID: 631494

Provider Gender: Male

License Number: A81206

NPI: 1750498119


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Hospital Affiliation: ST MARYS
MEDICAL CENTER SAN
FRANCISCO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


SHI, RUJING

Provider ID: 417937

Provider Gender: Female

License Number: 20A19399

NPI: 1710446539


 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE


SMILDE, RENEE


Provider ID: 417937

Provider Gender: Female

License Number: A70175

NPI: 1427010594

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Dutch


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360

Provider Gender: Female

License Number: C55724

NPI: 1689010324

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):


N



 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

Provider ID: 417101
 Provider Gender: Female
 License Number: A156854
 NPI: 1629480272
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
 Board Certified Specialty: No
 OPERATION SAMAHAN

 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126

 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426


 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4:30PM

INTERNAL MEDICINE



VIDAURRAZAGA, MONICA


Provider ID: 417937
 Provider Gender: Female
 License Number: A169207
 NPI: 1346628310

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583
 Provider Gender: Female

License Number: A60801

NPI: 1043375231

Provider English Spoken: Y

Provider Language(s) Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD



MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101

 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046

Provider Gender: Male

License Number: C186338

NPI: 1295738516

Provider English Spoken: Y

Provider Language(s) Spoken: Thai

Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046

Provider Gender: Male

License Number: C186338

NPI: 1295738516

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167

Provider Gender: Male

License Number: A79383

NPI: 1649373739

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERVENTIONAL

CARDIOLOGY

SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

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Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,
Provider ID: 179619
NPI: 1578672184
Provider English Spoken: Y
Cultural Competency: N
UCSD MEDICAL GROUP
330 LEWIS ST STE 400
SAN DIEGO, CA 92103
Phone: (619) 471-9260
Fax: (619) 471-9310
After Hours Phone: (619)
471-9260
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\25

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,
Provider ID: 179639
NPI: 1508968751
Provider English Spoken: Y
Cultural Competency: N
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 25\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

NEUROLOGY

CANTU-REYNA, GUILLERMO
Provider ID: 185268
Provider Gender: Male
License Number: A41375
NPI: 1447389101
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

NEUROLOGY

GRISOLIA, JAMES
Provider ID: 417937
Provider Gender: Male
License Number: G42884
NPI: 1336102359
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937
Provider Gender: Female
License Number: 20A19975
NPI: 1235665662
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

NEUROLOGY

MARTIN, FREDERIC

Provider ID: 417937
Provider Gender: Male
License Number: G61965
NPI: 1265582605
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

515-2545

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER


NEUROLOGY


TAFRESHI, GILDA

Provider ID: 417937
Provider Gender: Female
License Number: A103111
NPI: 1891946950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

OBSTETRICS / GYNECOLOGY


AL-MSHHDANI, AYSER

Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont


Hospital, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213


 Website: www.lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206360

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206363

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444
After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER







Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية



Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM





OBSTETRICS / GYNECOLOGY

BLAKE, GARY
Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD






SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE
Provider ID: 402851
Provider Gender: Female
License Number: A68463
NPI: 1376663831
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
Provider ID: 206362
Provider Gender: Female
License Number: A68463
NPI: 1376663831
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 416831
 Provider Gender: Female
 License Number: A68463
 NPI: 1376663831

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SHARP MARY
 BIRCH HOSP FOR WOMEN
 AND NEWBORNS
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362
 Provider Gender: Female
 License Number: A68463
 NPI: 1376663831

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SHARP MARY
 BIRCH HOSP FOR WOMEN
 AND NEWBORNS
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206363
 Provider Gender: Female
 License Number: A68463
 NPI: 1376663831

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SHARP MARY
 BIRCH HOSP FOR WOMEN
 AND NEWBORNS
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2420
 After Hours Phone: (619)
 515-2420

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206360

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Provider Gender: Female

License Number: A68463

NPI: 1376663831

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 1809 NATIONAL AVE

SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

📞 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 1809 NATIONAL AVE

SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

📞 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8AM-7PM

TU-TH 8AM-6PM

F 8AM-5:30PM

SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 4725 MARKET ST

SAN DIEGO, CA 92102

☎ Phone: (619) 515-2420

📞 After Hours Phone: (619)
515-2420

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444
After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5PM
TH 9:30AM-6PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206363

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206360

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N





Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO


1809 NATIONAL AVE
SAN DIEGO, CA 92113






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS






Provider ID: 206360
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206363
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO



 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS


Provider ID: 416831
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO





 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)

515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 402851
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851
Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 206360
 Provider Gender: Female
 License Number: A148014
 NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Yue Chinese
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 402851
 Provider Gender: Female
 License Number: A148014
 NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Yue Chinese
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360
 Provider Gender: Female
 License Number: C159737
 NPI: 1326243833
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, Portuguese, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, RIVERSIDE COMMUNITY HOSP, HOAG HOSPITAL IRVINE
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206363

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 402851

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W 8:30AM-5PM
TH 9:30AM-6PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 416831

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-5:30PM

F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206360

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206363

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206363

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206360
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 402851
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619)

515-2444


Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation:

*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation:

*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


PHAN, TIFFANI


Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP*


*CHULA VISTA MED CTR,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA*


*Board Certified Specialty: No
OPERATION SAMAHAN*

 *10737 CAMINO RUIZ STE
235*

SAN DIEGO, CA 92126

 *Phone: (844) 200-2426*

 *After Hours Phone: (844)
200-2426*

 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA


Provider ID: 402851

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL*

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 416831
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)

515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206360
Provider Gender: Female
License Number: A164859
NPI: 1952751711

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206363
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W
8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
/clinics/king-chavez-health-
center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 402851

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

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ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

OPHTHALMOLOGY

NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male

License Number: A68124

NPI: 1396715991

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM
F 8:30AM-5PM
SA 8:30AM-5PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206360


Provider Gender: Male




License Number: G61394


NPI: 1649206541


Provider English Spoken: Y


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 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-7:30PM
TU-F 8:30AM-5:30PM

OPHTHALMOLOGY


SHAW, BLAKE


Provider ID: 206363

Provider Gender: Male

License Number: G61394

NPI: 1649206541

 *Provider English Spoken: Y*

 *Provider Language(s)*


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


FAMILY HEALTH CENTERS OF
SAN DIEGO

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)

515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY


ZABLIT, KARIM


Provider ID: 403583

Provider Gender: Male

License Number: A42127

NPI: 1083700538

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: French

Cultural Competency: N


Hospital Affiliation: SCRIPPS


GREEN HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-4:45PM

OTOLARYNGOLOGY

CRAWFORD, KAYVA


Provider ID: 206360

Provider Gender: Female

License Number: A165819

NPI: 1396241824

 *Provider English Spoken: Y*

 *Provider Language(s)*


Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OTOLARYNGOLOGY

DAVIS, MORGAN


Provider ID: 206360

Provider Gender: Female

License Number: A181809

NPI: 1891359154

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360
Provider Gender: Male
License Number: A186426
NPI: 1275152662
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER

PEDIATRICS

ABELL, GEOFFREY

Provider ID: 27341
Provider Gender: Male
NPI: 1245256130
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268
Provider Gender: Female
License Number: A104918
NPI: 1588707178
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
SA 8AM-2PM

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268
Provider Gender: Female
License Number: A81682

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NPI: 1992847263

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 255-9155

Fax: (619) 749-5480

🕒 After Hours Phone: (619)
255-9155

🌐 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

📍 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

☎ Phone: (858) 924-1960

Fax: (858) 924-1964

🕒 After Hours Phone: (858)
924-1960

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

📍 3514 30TH ST

SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

🕒 After Hours Phone: (619)
515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-5PM

PEDIATRICS

ANDREE, GREGOR

Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

🕒 After Hours Phone: (619)
280-2058

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PEDIATRICS

ANDREE, GREGOR

Provider ID: 482070

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)


Spoken: German, Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

PEDIATRICS

ARCHAMBAULT, CHRISTIAN

Provider ID: 5589

Provider Gender: Male

NPI: 1992776918

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, PALOMAR

HEALTH, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, CHILDRENS

HOSPITAL OF ORANGE

COUNTY, PARADISE VALLEY

HOSPITAL, PARADISE VALLEY

HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964

 After Hours Phone: (858)
924-1960

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese, French,
Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

AZIMI, AYSUN

Provider ID: 317194
Provider Gender: Female
NPI: 1710246160
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CLOVIS COMMUNITY HOSPITAL, CLOVIS COMMUNITY

HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227409
Provider Gender: Male
License Number: C55180
NPI: 1932106986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100


After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 206360
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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 *Accessibility: CONTACT PROVIDER*

SA 8AM-2PM

NPI: 1932660966


PEDIATRICS

CARSON, STEPHEN

Provider ID: 6735

Provider Gender: Male

NPI: 1780719872

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY


HOSPITAL, RADY CHILDRENS

HOSPITAL SAN DIEGO


Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

 *550 WASHINGTON ST STE 300*

SAN DIEGO, CA 92103

 *Phone: (619) 297-5437*

Fax: (619) 297-4567

 *After Hours Phone: (619) 297-5437*


 *Website: N/A*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-8:30PM F 8AM-5PM*

PEDIATRICS


CASTELNOVI, CLAUDIA


Provider ID: 185268

Provider Gender: Female

License Number: A111170

NPI: 1417279324

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French, Italian, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 *4060 FAIRMOUNT AVE SAN DIEGO, CA 92105*

 *Phone: (619) 255-9155*

 *After Hours Phone: (619) 255-9155*

 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CHEN, EILEEN


Provider ID: 606456

Provider Gender: Female

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 *7910 FROST ST STE 400 SAN DIEGO, CA 92123*

 *Phone: (858) 495-0500*
Fax: (858) 560-4279

 *After Hours Phone: (858) 495-0500*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363

Provider Gender: Female

License Number: A141057

NPI: 1255785150

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO



Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 *4725 MARKET ST SAN DIEGO, CA 92102*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None




American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CONE, STEPHANIE

Provider ID: 185268
 Provider Gender: Female
 License Number: A123929
 NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619) 255-9154
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
 SA 8AM-2PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360
 Provider Gender: Male
 License Number: 20A15743
 NPI: 1174942544
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM
 TU-TH 8AM-6PM
 F 8AM-5:30PM
 SA 8AM-5PM


PEDIATRICS

DIXON, SARAH

Provider ID: 482070
 Provider Gender: Female
 License Number: A137415
 NPI: 1467751131
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
 TU 8:30AM-8:30PM
 W-F 8:30AM-5:30PM
 SA 9AM-4PM

PEDIATRICS

FISHMAN, ELENA

Provider ID: 524340
 Provider Gender: Female
 NPI: 1740249432
 Provider English Spoken: Y
 Provider Language(s)

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Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

11943 EL CAMINO REAL STE 210
 SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 After Hours Phone: (858) 793-1011
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

FRIEDMAN, JAIME

Provider ID: 230500

Provider Gender: Female

NPI: 1144297961

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR HEALTH

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

16918 DOVE CANYON RD

STE 200

SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858)

924-1960

Website: N/A



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*


PEDIATRICS

GOGGIN, SAMANTHA





Provider ID: 185268
Provider Gender: Female
License Number: A163693
NPI: 1023506367
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 255-9154*
 *After Hours Phone: (619) 255-9154*
 *Website: www.lamaestra.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

PEDIATRICS



GRAY, SARAH

Provider ID: 206360
Provider Gender: Female
License Number: A151631
NPI: 1508210311
 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO



 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M 8:30AM-7PM*
TU-TH 8:30AM-6PM
F 8:30AM-5:30PM
SA 8:30AM-5PM


PEDIATRICS

GUPTA, VARSHA

Provider ID: 206360
Provider Gender: Female
License Number: A164889
NPI: 1891283214
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*


 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

HENDERSON, TREVOR

Provider ID: 58111
Provider Gender: Male
NPI: 1356449425
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, ALVARADO HOSPITAL LLC
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 6699 ALVARADO RD STE 2200
 SAN DIEGO, CA 92120
 *Phone: (619) 265-3400*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Fax: (619) 265-3407

☎ After Hours Phone: (619) 265-3400

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): ☎ Hours: M-TH 8AM-8:30PM
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

HIBBS, NICOLE

Provider ID: 143979

Provider Gender: Female

NPI: 1164627832

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 550 WASHINGTON ST STE 300

SAN DIEGO, CA 92103

☎ Phone: (619) 297-5437

Fax: (619) 297-4567

☎ After Hours Phone: (619) 297-5437

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8:30PM
F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

HOANG, VY

Provider ID: 161902

Provider Gender: Female

NPI: 1649575135

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 6699 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (619) 265-3400

Fax: (619) 265-3407

☎ After Hours Phone: (619) 265-3400

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

HORMOZDYARAN, SANAYA

Provider ID: 612398

Provider Gender: Female

NPI: 1750887634

📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

📍 2790 TRUXTUN RD STE 120A

SAN DIEGO, CA 92106

☎ Phone: (619) 222-1253

Fax: (619) 222-1276

☎ After Hours Phone: (619) 222-1253

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM

PEDIATRICS


JORDAN, JAMIE

Provider ID: 237831


Provider Gender: Female

NPI: 1275762833

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 12036 SCRIPPS
 HIGHLANDS DR STE 102
 SAN DIEGO, CA 92131

 *Phone: (858) 566-4444*
Fax: (858) 566-3321


 *After Hours Phone: (858)*
566-4444

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F 8AM-5PM*

PEDIATRICS

JUAREZ, PATRICIA

Provider ID: 317641

Provider Gender: Female

NPI: 1205807229

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SHARP
MEMORIAL HOSPITAL, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 7910 FROST ST STE 400
 SAN DIEGO, CA 92123

 *Phone: (858) 495-0500*
Fax: (858) 560-4279

 *After Hours Phone: (858)*
495-0500


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F 8AM-5PM*

PEDIATRICS


KARMAKAR, KANKA


Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog


Cultural Competency: N


Board Certified Specialty: No
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE
 235

SAN DIEGO, CA 92126

 *Phone: (844) 200-2426*

 *After Hours Phone: (844)*
200-2426


 *Website: www.operationsa*
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-TU*
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

PEDIATRICS

KESANAPALLI, DEEPTHI

Provider ID: 235069

Provider Gender: Female

NPI: 1487948584

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Telugu

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 7910 FROST ST STE 335
 SAN DIEGO, CA 92123

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

☎ Phone: (858) 576-8010

☎ Fax: (858) 576-7391

🕒 After Hours Phone: (858) 576-8010

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8:30AM-6PM
F 8:30AM-0PM

PEDIATRICS

LAWRIE, ALISA

Provider ID: 660912

Provider Gender: Female

NPI: 1407847908

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

☎ Phone: (619) 297-4567

🕒 After Hours Phone: (619)
297-4567

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-8PM
F 8AM-5PM

PEDIATRICS

LE, NGUYEN

Provider ID: 44952

Provider Gender: Male

NPI: 1548308109

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL

HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

📍 5507 EL CAJON BLVD STE
B

SAN DIEGO, CA 92115

☎ Phone: (619) 582-8814

☎ Fax: (619) 582-8813

🕒 After Hours Phone: (619)
582-8814

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

PEDIATRICS

LOPER, KAREN

Provider ID: 490610

Provider Gender: Female

NPI: 1619908936

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

📍 550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

☎ Phone: (619) 297-5437

☎ Fax: (619) 297-4567

🕒 After Hours Phone: (619)
297-5437

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

LUJAN, ARLEEN

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Provider ID: 206360
 Provider Gender: Female
 License Number: A61687
 NPI: 1760412431
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

PEDIATRICS

MADANY, GEORGE

Provider ID: 318924
 Provider Gender: Male
 NPI: 1811968837
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, French,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

7910 FROST ST STE 400
 SAN DIEGO, CA 92123
 Phone: (858) 495-0500
 Fax: (858) 560-4279

After Hours Phone: (858)
 495-0500

Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070
 Provider Gender: Female
 License Number: A92173
 NPI: 1487843454

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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

After Hours Phone: (858)
 810-8700

Website: www.sdfamilycare
 .org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268
 Provider Gender: Female
 License Number: A75533
 NPI: 1356397418

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: VALLEY
 CHILDRENS HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
 255-9155

Website: www.lamaestra.or
 g


Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): **NGUYEN, JANICE**

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-6PM
SA 8AM-2PM

Provider ID: 416831

Provider Gender: Female

License Number: A157335

NPI: 1760916589


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): 

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-5PM


PEDIATRICS

PARK, TARI

Provider ID: 237711

Provider Gender: Female

NPI: 1285669085

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean


Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

 Phone: (858) 566-4444

Fax: (858) 566-3321

 After Hours Phone: (858)
566-4444

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): 

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

PARKER, SHERINE


Provider ID: 206360

Provider Gender: Female

License Number: G81658

NPI: 1477626513

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,

GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY

MEDICAL CTR, RADY

PEDIATRICS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7PM
TU-TH 8:30AM-6PM
F 8:30AM-5:30PM
SA 8:30AM-5PM

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831
Provider Gender: Female
License Number: A126181
NPI: 1740467299
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

PEDIATRICS

POWELL, STEPHANIE

Provider ID: 319033
Provider Gender: Female
NPI: 1720059744
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279

After Hours Phone: (858) 495-0500

Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583
Provider Gender: Female
License Number: G29879
NPI: 1598088759
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

PEDIATRICS


RODRIGUEZ, JAVIER

Provider ID: 185268
Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: A82639

NPI: 1013059385

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155


 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


RODRIGUEZ, ALDO


Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4PM


PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MEMORIAL


HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

 11943 EL CAMINO REAL
STE 210

SAN DIEGO, CA 92130

 Phone: (858) 793-1011

 After Hours Phone: (858)
793-1011

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

PEDIATRICS

SAMPATH, SRIVIDYA

Provider ID: 416831

Provider Gender: Female

License Number: A132576

NPI: 1275892754

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


























 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18



American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;">PEDIATRICS</p> <p>SEBSO, JODI <i>Provider ID: 416831</i> <i>Provider Gender: Female</i> <i>License Number: A103099</i> <i>NPI: 1538484316</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</i> <i>Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</i>  3514 30TH ST SAN DIEGO, CA 92104  <i>Phone: (619) 515-2424</i>  <i>After Hours Phone: (619) 515-2424</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">PEDIATRICS</p> <p>SEBSO, JODI <i>Provider ID: 206360</i></p>	<p><i>Provider Gender: Female</i> <i>License Number: A103099</i> <i>NPI: 1538484316</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</i> <i>Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</i>  1809 NATIONAL AVE SAN DIEGO, CA 92113  <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 9AM-5PM</i></p> <hr/> <p style="text-align: center;">PEDIATRICS</p> <p>SELLERS, JAIME <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: A159494</i> <i>NPI: 1720512015</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: Sharp Grossmont Hospital, RADY CHILDRENS HOSPITAL SAN</i></p>	<p><i>DIEGO</i> <i>Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</i>  1809 NATIONAL AVE SAN DIEGO, CA 92113  <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">PEDIATRICS</p> <p>SHENOY, ASHVIN <i>Provider ID: 232392</i> <i>Provider Gender: Male</i> <i>NPI: 1619262664</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL</i> <i>Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</i>  292 EUCLID AVE STE 220</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


SAN DIEGO, CA 92114
 Phone: (619) 262-8624
 Fax: (619) 262-6639
 After Hours Phone: (619) 262-8624
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

SHETH, HASMUKH



Provider ID: 451167
 Provider Gender: Male
 License Number: A45942
 NPI: 1396812236
 Provider English Spoken: Y
 Provider Language(s) Spoken: Gujarati, Hindi, Urdu
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-healt

h- center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

SHIAU, NANCY

Provider ID: 40852
 Provider Gender: Female
 NPI: 1750352779
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 6699 ALVARADO RD STE 2200
 SAN DIEGO, CA 92120
 Phone: (619) 265-3400
 Fax: (619) 265-3407
 After Hours Phone: (619) 265-3400
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 206360
 Provider Gender: Female
 License Number: A76785
 NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Female
License Number: A76785
NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619) 515-2525
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 402851
Provider Gender: Female
License Number: A76785
NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

STUMP, CHARI

Provider ID: 587747
Provider Gender: Female
NPI: 1265968788
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 400 SAN DIEGO, CA 92123
 Phone: (858) 495-0500
 Fax: (858) 560-4279
 After Hours Phone: (858)

495-0500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

SUBRAMANIAN, RAMA

Provider ID: 662343
Provider Gender: Female
NPI: 1932593506
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tamil
Cultural Competency: N
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 11943 EL CAMINO REAL STE 210 SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 After Hours Phone: (858) 793-1011
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PEDIATRICS


SULEIMAN QAFITI, KHAWLA

Provider ID: 416831

Provider Gender: Female

License Number: A51318

NPI: 1659303121

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-5PM

PEDIATRICS


TAMAYO, MAITHE


Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF


SAN DIEGO

 2391 ISLAND AVE

SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


TAMAYO, MAITHE


Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 11943 EL CAMINO REAL
STE 210


SAN DIEGO, CA 92130

 Phone: (858) 793-1011


 After Hours Phone: (858)


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793-1011

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM
SA 8AM-0PM

PEDIATRICS

WATERS, ELIZABETH


Provider ID: 153090
Provider Gender: Female
NPI: 1730477621
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 Phone: (619) 262-8624
Fax: (619) 262-6639


 After Hours Phone: (619)

262-8624

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS


WEATHERLY, JACOB

Provider ID: 637376
Provider Gender: Male
NPI: 1538520457
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 6699 ALVARADO RD STE 2200

SAN DIEGO, CA 92120
 Phone: (619) 265-3400
Fax: (619) 265-3407

 After Hours Phone: (619) 265-3400

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM
SA 8:30AM-0PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 233532
Provider Gender: Female
License Number: A94449
NPI: 1851599872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Provider Gender: Female

License Number: A94449

NPI: 1851599872

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

🕒 After Hours Phone: (858)
810-8700

🌐 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:30AM-5:30PM

TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

PEDIATRICS

ZAHEER, AARON

Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

🕒 After Hours Phone: (858)
810-8700

🌐 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

ZAHEER, AARON

Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

🕒 After Hours Phone: (619)
280-2058

🌐 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

ZAND, FARIBA

Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

UCSD MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO






📍 1809 NATIONAL AVE


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SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER




PHYSICIANS ASSISTANT



ALVARADO, EDMUND
 Provider ID: 419529
 Provider Gender: Male
 License Number: PA20888
 NPI: 1720303340
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619) 515-2422
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE
 Provider ID: 185268
 Provider Gender: Male
 License Number: PA13694
 NPI: 1346382611
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org





g
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM
 SA 8AM-2PM

PHYSICIANS ASSISTANT

BATISTA, OSVALDO
 Provider ID: 206360
 Provider Gender: Male
 License Number: PA17864
 NPI: 1245349224
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT






BHAGAN, SHANNA
 Provider ID: 206362
 Provider Gender: Female
 License Number: PA59874
 NPI: 1437635943
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

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N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT





BHAGAN, SHANNA
 Provider ID: 206362
 Provider Gender: Female
 License Number: PA59874
 NPI: 1437635943
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
 Provider ID: 206362
 Provider Gender: Female
 License Number: PA17220
 NPI: 1376550657
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No





FAMILY HEALTH CENTERS OF SAN DIEGO


 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
 Provider ID: 206362
 Provider Gender: Female
 License Number: PA17220
 NPI: 1376550657
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY
 Provider ID: 206360
 Provider Gender: Female
 License Number: PA23258
 NPI: 1790111607
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO






 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER








PHYSICIANS ASSISTANT

CONDEZ, ESEL
 Provider ID: 206360
 Provider Gender: Male
 License Number: PA53129
 NPI: 1073978680
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

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 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER







PHYSICIANS ASSISTANT

CONTRERAS, LORETTA
Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5PM
TH 8:30AM-9PM

F 8:30AM-5PM

PHYSICIANS ASSISTANT






DAVID, MARVIC
Provider ID: 206360
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

DRAME, SALWA
Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO


 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FINK, PATRICK
Provider ID: 402851
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


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C. دليل الرعاية الأولية

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM*

PHYSICIANS ASSISTANT

GARCIA, DEANA

*Provider ID: 416831
Provider Gender: Female
License Number: PA21042
NPI: 1447567995*
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*






 3514 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619)
515-2424*
 *Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA



*Provider ID: 418142
Provider Gender: Female
License Number: PA58505
NPI: 1104203454*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*



 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 *Phone: (619) 515-2454*
 *After Hours Phone: (619)
515-2454*
 *Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA


*Provider ID: 206363
Provider Gender: Female
License Number: PA58505
NPI: 1104203454*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*






 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619)
515-2560*

 *Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

LANDIS, SARAH

*Provider ID: 417782
Provider Gender: Female
License Number: PA58826
NPI: 1144733676*
 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO*

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101
 *Phone: (619) 515-2430*
 *After Hours Phone: (619)
515-2430*
 *Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-5PM*

PHYSICIANS ASSISTANT

LAPINA, LORI

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 417937

Provider Gender: Female


License Number: PA23231


NPI: 1245670413


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362

Provider Gender: Female


License Number: PA23231

NPI: 1245670413

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)

515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8AM-5PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362

Provider Gender: Female


License Number: PA23231


NPI: 1245670413


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 3544 30TH ST
SAN DIEGO, CA 92104


 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8AM-5PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429


Provider Gender: Male


License Number: PA62752


NPI: 1487307369


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO


 1550 BROADWAY STE 2
SAN DIEGO, CA 92101


 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female

License Number: PA63071

NPI: 1902580426

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y
Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155



Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM SA 8AM-2PM

PHYSICIANS ASSISTANT

MILLER, LAUREL

Provider ID: 206363
 Provider Gender: Female
 License Number: PA20378
 NPI: 1598992133
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO






 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

NUNO, JOSE

Provider ID: 206360
 Provider Gender: Male
 License Number: PA15227
 NPI: 1275543068
 Provider English Spoken: Y

Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO


 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PENA, NICHOLAS

Provider ID: 206360
 Provider Gender: Male
 License Number: PA56636
 NPI: 1083176077
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO


 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046
 Provider Gender: Female
 License Number: PA53902
 NPI: 1639528110
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM TU 8AM-8PM W-F 8AM-5PM SA 9AM-1PM

PHYSICIANS ASSISTANT


PHUNG, AIVI

Provider ID: 206046
 Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: PA53902

NPI: 1639528110

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF
SAN DIEGO

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT



QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female


License Number: PA52141


NPI: 1407855828


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: MERCY

HOSPITAL OF FOLSOM

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

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SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363
Provider Gender: Female
License Number: MT2061555
NPI: 1215264452
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363
Provider Gender: Female
License Number: PA58081
NPI: 1215264452
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

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C. دليل الرعاية الأولية

PROVIDER

PHYSICIANS ASSISTANT

TREUNER, JULIE

Provider ID: 206360

Provider Gender: Female

License Number: PA17478

NPI: 1922013614


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male


License Number: PA19664


NPI: 1841472776


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426


 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

VARGAS, ROBERT

Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER






 Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 206362
 Provider Gender: Female
 License Number: PA18746
 NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO


 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER



PHYSICIANS ASSISTANT

YOUNG-PEN, TONI
 Provider ID: 206362
 Provider Gender: Female
 License Number: PA18746
 NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No





FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI
 Provider ID: 233597
 Provider Gender: Female
 License Number: PA18746
 NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4290 POLK AVE
 SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
 563-0250
 Website: www.sdfamilycare
 .org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

PODIATRIST

JUAREZ, LETICIA
 Provider ID: 206360
 Provider Gender: Female
 License Number: DPM5661
 NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


PODIATRIST

LE, DIANA
 Provider ID: 206360
 Provider Gender: Female
 License Number: DPM5734

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

NPI: 1184112864

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR


Board Certified Specialty: No
FAMILY HEALTH CENTERS OF


SAN DIEGO

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 631494

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN

SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

 Provider English Spoken: Y

Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE

GENERAL


HILL, LINDA

Provider ID: 206046


Provider Gender: Female



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C. دليل الرعاية الأولية






License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM



PREVENTATIVE MEDICINE GENERAL

RISSER, JOSEPH
Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 279-0377
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

RISSER, JOSEPH
Provider ID: 482070
Provider Gender: Male
License Number: G70886
NPI: 1952386765
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

RISSER, JOSEPH
Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 279-0377
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

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<p>PREVENTATIVE MEDICINE GENERAL</p>	<p>License Number: A93812 NPI: 1508912130</p>	<p>Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p>
<p>ROMERO, CAMILA Provider ID: 206046 Provider Gender: Female License Number: A93812 NPI: 1508912130</p>	<p>☐ Provider English Spoken: Y ☐ Provider Language(s) Spoken: French, Spanish Cultural Competency: N</p>	<p>📍 1809 NATIONAL AVE SAN DIEGO, CA 92113</p>
<p>☐ Provider English Spoken: Y ☐ Provider Language(s) Spoken: French, Spanish Cultural Competency: N Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p>	<p>📍 6973 LINDA VISTA RD SAN DIEGO, CA 92111 ☎ Phone: (858) 279-0925 📠 Fax: (858) 279-0377 🕒 After Hours Phone: (858) 279-0925 🌐 Website: www.sdfamilycare .org</p>	<p>☎ Phone: (619) 515-2300 🕒 After Hours Phone: (619) 515-2300 🌐 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p>
<p>📍 6973 LINDA VISTA RD SAN DIEGO, CA 92111 ☎ Phone: (858) 279-0925 📠 Fax: (858) 279-0377 🕒 After Hours Phone: (858) 279-0925 🌐 Website: www.sdfamilycare .org</p>	<p>☎ Phone: (858) 279-0925 📠 Fax: (858) 279-0377 🕒 After Hours Phone: (858) 279-0925 🌐 Website: www.sdfamilycare .org</p>	<p>🗣 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 9AM-5PM</p>
<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🗣 Accessibility: CONTACT PROVIDER</p>	<p>🗣 Accessibility: CONTACT PROVIDER</p>	<p>🗣 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 9AM-5PM</p>
<p>PREVENTATIVE MEDICINE GENERAL</p>	<p>REGISTERED PHYSICAL THERAPIST</p>	<p>REGISTERED PHYSICAL THERAPIST</p>
<p>ROMERO, CAMILA Provider ID: 206046 Provider Gender: Female</p>	<p>BLOCKER, NIRIT Provider ID: 206360 Provider Gender: Female License Number: PT30272 NPI: 1457689309</p>	<p>CHAVARRIA, JESSICA Provider ID: 417937 Provider Gender: Female License Number: PT292351 NPI: 1407391808 ☐ Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p>
<p>☐ Provider English Spoken: Y ☐ Provider Language(s) Spoken: Hebrew Cultural Competency: N</p>	<p>☐ Provider English Spoken: Y ☐ Provider Language(s) Spoken: Hebrew Cultural Competency: N</p>	<p>📍 4094 4TH AVE SAN DIEGO, CA 92103 ☎ Phone: (619) 515-2545 🕒 After Hours Phone: (619) 515-2545 🌐 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): **CUMMINGS, GEORGE**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

REGISTERED PHYSICAL THERAPIST


CONCORS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: PT12930

NPI: 1578706743

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM


REGISTERED PHYSICAL THERAPIST

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Sign Language


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH

Provider ID: 417937

Provider Gender: Male

License Number: PT40975

NPI: 1235577560


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

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 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL THERAPIST


HAPKE, ELENA

Provider ID: 417937


Provider Gender: Female


License Number: PT292613


NPI: 1003354895

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103


 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL THERAPIST



HERMES, MARY

Provider ID: 206360

Provider Gender: Female

License Number: PT24707


NPI: 1518028547


 *Provider English Spoken: Y*
 *Provider Language(s)*


Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL THERAPIST

IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female


License Number: PT33914


NPI: 1003088063


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL THERAPIST

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female


License Number: PT296559


NPI: 1114583176


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*


 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM*

REGISTERED PHYSICAL THERAPIST



MIGNEA, DAVID

Provider ID: 417937

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Provider Gender: Male
 License Number: PT293536
 NPI: 1043736879
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937
 Provider Gender: Male
 License Number: PT28061
 NPI: 1780685032
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON

Provider ID: 417937
 Provider Gender: Male
 License Number: PT25155
 NPI: 1487658720
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO






 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363
 Provider Gender: Female
 License Number: A142743
 NPI: 1649564295
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: JOHN
 MUIR MEDICAL CENTER
 WALNUT CREEK CAMPUS
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

RHEUMATOLOGY

REDDY, DANA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 206363
 Provider Gender: Female
 License Number: A115598
 NPI: 1144538778
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 403583
 Provider Gender: Female

License Number: A115598
 NPI: 1144538778
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM

SPEECH PATHOLOGIST

MILLER, WILLIAM

Provider ID: 206360
 Provider Gender: Male
 License Number: SP35150
 NPI: 1972002210
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA


Provider ID: 206360
 Provider Gender: Female
 License Number: SP27677
 NPI: 1932680006
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes

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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

SAN MARCOS

CERTIFIED NURSE PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)


Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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FODDA, RAMI

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER




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PROVIDER

**CERTIFIED NURSE
PRACTITIONER**

FREEMAN, WANDA






Provider ID: 206426
 Provider Gender: Female
 License Number: NP95003903
 NPI: 1659504264
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
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 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**CERTIFIED NURSE
PRACTITIONER**

HENLEY, MEARA

Provider ID: 206426
 Provider Gender: Female
 License Number: NP95002545
 NPI: 1538319645
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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 N
 Accessibility: CONTACT
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Provider ID: 206426
 Provider Gender: Female
 License Number: NP95002545
 NPI: 1538319645
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

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Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
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Accessibility: CONTACT

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Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

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C. دليل الرعاية الأولية

License Number: NP21368

NPI: 1952658445

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD
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736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368

NPI: 1952658445

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368

NPI: 1952658445

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

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736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

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☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-5PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 1595 GRAND AVE STE 106 SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

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🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Bengali
Cultural Competency: N

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Min/Max Age: 0\None

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NATH, DEVARSHI

Provider ID: 614511

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C. دليل الرعاية الأولية

Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

FQHC

TRUECARE,

Provider ID: 614511
 NPI: 1811617939
 ☑ Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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🌐 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

TRUECARE,

Provider ID: 614511

NPI: 1598484255

☑ Provider English Spoken: Y
 Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1811617939

☑ Provider English Spoken: Y
 Cultural Competency: N

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NPI: 1598484255

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♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM
 SA 8AM-5PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1245246917

☑ Provider English Spoken: Y
 Cultural Competency: N

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🌐 Website: www.ihpsocal.org
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Min/Max Age: 0\None

American Sign Language (ASL):

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

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American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Polish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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Hospital Affiliation: SCRIPPS

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ENCINITAS

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INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED RD
SAN MARCOS, CA 92069

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

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE



Provider ID: 206426

Provider Gender: Female

License Number: A93248

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1174703680


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS


MALHOTRA, ARATI

Provider ID: 110242

Provider Gender: Female

NPI: 1215135306

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM

PEDIATRICS


MALHOTRA, ARATI


Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI


Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

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Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MATIAS, JULIE

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK



150 VALPREDA RD
SAN MARCOS, CA 92069



Phone: (760) 736-6767



Fax: (760) 736-6744



After Hours Phone: (760)
736-6767



Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER



Hours: M 8AM-6PM
TU 8AM-5PM
W-F 8AM-6PM
SA 8AM-5PM

PEDIATRICS

MONAHAN, CAROLYN

Provider ID: 50425

Provider Gender: Female

NPI: 1619973666

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK



1582 W SAN MARCOS
BLVD STE 203
SAN MARCOS, CA 92078



Phone: (760) 744-6710



Fax: (760) 744-6156



After Hours Phone: (760)

744-6710



Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER



Hours: M-F 8AM-5PM

PEDIATRICS

NEVES, VANESSA

Provider ID: 143763

Provider Gender: Female

NPI: 1174672547



Provider English Spoken: Y



Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK



150 VALPREDA RD
SAN MARCOS, CA 92069



Phone: (760) 736-6767



Fax: (760) 736-6797



After Hours Phone: (760)
736-6767



Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

PEDIATRICS


POSADAS, EMERITO


Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO


Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


POSADAS, EMERITO

Provider ID: 303661

Provider Gender: Male

NPI: 1720093198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM


PEDIATRICS


QUINTERO, CAROLYN

Provider ID: 614767

Provider Gender: Female

NPI: 1023033156


 Provider English Spoken: Y

 Provider Language(s) Spoken: Afar, Spanish

Cultural Competency: N

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-5PM


PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SOCHA, TRACI

Provider ID: 428861

Provider Gender: Female

NPI: 1669478616

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 1582 W SAN MARCOS BLVD STE 203
SAN MARCOS, CA 92078

☎ Phone: (760) 744-6710

Fax: (760) 744-6156

☎ After Hours Phone: (760) 744-6710

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-4:45PM

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER




Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767


☎ After Hours Phone: (760) 736-6767




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 Website: www.ihpsocal.org License Number: PA22667
 Medi-Cal Open Panel: Yes NPI: 1174964001
 Min/Max Age: 0\None  Provider English Spoken: Y
 American Sign Language (ASL): Cultural Competency: N
 N Hospital Affiliation:
 Accessibility: CONTACT GROSSMONT HOSPITAL
 PROVIDER Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

PHYSICIANS ASSISTANT

CHISWICK, GARY



Provider ID: 206426
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT


CHISWICK, GARY




Provider ID: 206426
 Provider Gender: Male



 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY


Provider ID: 206426
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP






 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)

736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426
 Provider Gender: Male
 License Number: PA17101
 NPI: 1316947302
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426
 Provider Gender: Male
 License Number: PA17101


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

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C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT


SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723


NPI: 1518133032


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
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Min/Max Age: 0\None

American Sign Language (ASL):
N

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PROVIDER

PHYSICIANS ASSISTANT


SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH


Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

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 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH



Provider ID: 206426

Provider Gender: Female

License Number: PA51867

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NPI: 1295147387


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi

Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
 736-6767

 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

PHYSICIANS ASSISTANT



TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867


NPI: 1295147387

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi

Cultural Competency: N


Board Certified Specialty: No
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 After Hours Phone: (760)


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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

PODIATRIST


DASGUPTA, DEBORSHI


Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Bengali, Hindi,
 Spanish


Cultural Competency: N

Hospital Affiliation: CLOVIS
 COMMUNITY HOSPITAL,
 COMMUNITY REGIONAL
 MEDICAL CENTER-FRESNO,
 FRESNO HEART AND
 SURGICAL HOSPITAL

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078

 Phone: (760) 736-6767


 After Hours Phone: (760)
 736-6767

 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

PODIATRIST

DASGUPTA, DEBORSHI


Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Bengali, Hindi,
 Spanish


Cultural Competency: N

Hospital Affiliation: CLOVIS
 COMMUNITY HOSPITAL,
 COMMUNITY REGIONAL
 MEDICAL CENTER-FRESNO,
 FRESNO HEART AND
 SURGICAL HOSPITAL

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
 736-6767

 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT

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PROVIDER

🕒 Hours: M-F 8AM-5PM

PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767

🕒 After Hours Phone: (760)
736-6767

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

SAN YSIDRO

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELIZ, ADRIANA

Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHAUSSE CASTRO, EKATERINA

Provider ID: 227469

Provider Gender: Female

License Number: NP95018617

NPI: 1154040418




☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173



☎ Phone: (619) 662-4100

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 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM


CERTIFIED NURSE PRACTITIONER


GARCIA, TEDAYSHIA

Provider ID: 206292
 Provider Gender: Female
 License Number: NP95003355
 NPI: 1659730778
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER


CERTIFIED NURSE PRACTITIONER


GUADARRAMA, IGNACIO


Provider ID: 227469
 Provider Gender: Male
 License Number: NP95003671
 NPI: 1821331174

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


HACINAS, REYNALDO

Provider ID: 206292
 Provider Gender: Male
 License Number: NP95003024
 NPI: 1215304860

 Provider English Spoken: Y



Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA




Provider ID: 206292
 Provider Gender: Female
 License Number: NP12112
 NPI: 1114957289
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173

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C. دليل الرعاية الأولية

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA



Provider ID: 227469
 Provider Gender: Female
 License Number: NP12112
 NPI: 1114957289

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173

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

 Website: <https://www.syhealth.org/clinics/san-ysidro-health-center>


[alth.org/locations](http://www.syhealth.org/locations)
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE PRACTITIONER


KANTAS, PARIS

Provider ID: 206292
 Provider Gender: Male
 License Number: NP18661
 NPI: 1114329612

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173


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

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


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

SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER



ORDINANZA, MYLENE


Provider ID: 227469
 Provider Gender: Female
 License Number: NP95019995
 NPI: 1265019061

 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173

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

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469
 Provider Gender: Female
 License Number: NP95017732
 NPI: 1326599002

 Provider English Spoken: Y
 Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
Provider ID: 227469
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
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After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA
Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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SAN YSIDRO, CA 92173
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Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OCHOA, RAUL
Provider ID: 206292
Provider Gender: Male
License Number: DC33693
NPI: 1518401827

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES



CRUZ, MICHAEL
Provider ID: 206292
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD







اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE








ALGHAMDI, ASMA
 Provider ID: 227469
 Provider Gender: Female
 License Number: A167529
 NPI: 1316310840
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ALVAREZ-ESTRADA, MIGUEL
 Provider ID: 227411
 Provider Gender: Male
 License Number: A157505
 NPI: 1588197826
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL



Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
 Provider ID: 206292
 Provider Gender: Male

License Number: A157505
 NPI: 1588197826
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ARRIETA, NOEMI
 Provider ID: 206292
 Provider Gender: Female
 License Number: 20A11153
 NPI: 1912223496
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

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C. دليل الرعاية الأولية

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
/clinics/san-ysidro-health-
-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

BAUM, PETER

Provider ID: 227411
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)

662-4100
Website: syhealth.org/clinic
s/maternal-child-health-
center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

BORSAN, COSMIN

Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
Provider English Spoken: Y
Provider Language(s)
Spoken: Romanian

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
/clinics/san-ysidro-health-
-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: syhealth.org/clinic
s/maternal-child-health-
center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA


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C. دليل الرعاية الأولية

Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE


Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

[/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 227411
 Provider Gender: Female
 License Number: A112627
 NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DALUGDUGAN, ESTHER
 Provider ID: 206292
 Provider Gender: Female
 License Number: A112511
 NPI: 1962662718
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DAVIS, CHARLES
 Provider ID: 206292
 Provider Gender: Male
 License Number: G41219
 NPI: 1194840231
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

FAMILY PRACTICE

ESTRADA, JOHANNA
 Provider ID: 206292
 Provider Gender: Female
 License Number: A127188
 NPI: 1255698155
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS GREEN
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT

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PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 206292
 Provider Gender: Female
 License Number: A125329
 NPI: 1780979120
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

FAMILY PRACTICE

HENDRIX, JEFFERSON

Provider ID: 227469

Provider Gender: Male
 License Number: A32571
 NPI: 1235142738

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/locations

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER





FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 227469
 Provider Gender: Male
 License Number: C42207
 NPI: 1285782151

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 206292
 Provider Gender: Male
 License Number: C42207
 NPI: 1285782151

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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FAMILY PRACTICE


KAUFHOLD, ANNE


Provider ID: 206292

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST


ELIZABETH HOSP

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 227469

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST


ELIZABETH HOSP


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100










 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>LEPEZ, DAVID</p> <p><i>Provider ID: 206292</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A130348</i></p> <p><i>NPI: 1205196029</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/san-ysidro-health-center</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>LEUTE, ERIC</p>	<p><i>Provider ID: 206292</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A80832</i></p> <p><i>NPI: 1720171507</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/san-ysidro-health-center</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5:30PM SA 8:30AM-2PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>MOYA, MARY</p> <p><i>Provider ID: 206292</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A80185</i></p>	<p><i>NPI: 1093844417</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/san-ysidro-health-center</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>NAVARRO, VANESSAMARIA</p> <p><i>Provider ID: 227469</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A113624</i></p> <p><i>NPI: 1952563421</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Filipino, Spanish, Tagalog</i></p> <p><i>Cultural Competency: N</i></p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
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662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ORTIZ, KENNETH

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider ID: 206292
 Provider Gender: Male
 License Number: A156607
 NPI: 1356761571
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 206292
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian
 Cultural Competency: N

Hospital Affiliation: CHULA
 VISTA COMM HOSP
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian
 Cultural Competency: N
 Hospital Affiliation: CHULA
 VISTA COMM HOSP
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173

Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292
 Provider Gender: Male
 License Number: 20A7435
 NPI: 1356556021
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

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ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982


NPI: 1801230297


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ROJAS, SARAH

Provider ID: 206292

Provider Gender: Female

License Number: A139169

NPI: 1245645076


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292

Provider Gender: Male

License Number: A169694

NPI: 1922532712


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292

Provider Gender: Male


License Number: A158364


NPI: 1245401298


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN



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C. دليل الرعاية الأولية

Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



SNYDER, CHRISTOPHER





Provider ID: 206292
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PIH
Hospital - Downey, JOHN F
KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



STALEY, MICHAELA

Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173




 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SWEET, PATRICK

Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE


TALavera, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:30AM-5:30PM

FAMILY PRACTICE


TAN, LO FU

Provider ID: 227469

Provider Gender: Male

License Number: C170935

NPI: 1356314835


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: A77936

NPI: 1174534184

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292

Provider Gender: Male

License Number: A183145

NPI: 1194353094

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish




Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


VANHOLLEBEKE, RACHEL

Provider ID: 206292

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 206292

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,


Provider ID: 227411

NPI: 1558852947

 Provider English Spoken: Y
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1967

 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FQHC


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,


Provider ID: 206292

NPI: 1952364747

 Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ *After Hours Phone: (619) 662-4100*
 🌐 *Website: www.syhealth.org /clinics/san-ysidro-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 ♿ *Accessibility: CONTACT PROVIDER*
 🕒 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469
NPI: 1801438239
 🗣 *Provider English Spoken: Y*
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
 📍 *3364 BEYER BLVD SAN YSIDRO, CA 92173*
 📞 *Phone: (619) 662-4100*
Fax: (619) 600-4870
 ☎ *After Hours Phone: (619) 662-4100*
 🌐 *Website: https://www.syhealth.org/locations*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 ♿ *Accessibility: CONTACT PROVIDER*
 🕒 *Hours: M-F 8AM-5PM*

GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292
Provider Gender: Male
License Number: A181644
NPI: 1356929111
 🗣 *Provider English Spoken: Y*
 🗣 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 *4004 BEYER BLVD SAN YSIDRO, CA 92173*
 📞 *Phone: (619) 662-4100*
 ☎ *After Hours Phone: (619) 662-4100*
 🌐 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 ♿ *Accessibility: CONTACT PROVIDER*
 🕒 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

GENERAL PRACTICE

TEJEDA, FRANCISCO

Provider ID: 206292
Provider Gender: Male

License Number: A66885

NPI: 1407940075

🗣 *Provider English Spoken: Y*
 🗣 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 *4004 BEYER BLVD SAN YSIDRO, CA 92173*
 📞 *Phone: (619) 662-4100*
 ☎ *After Hours Phone: (619) 662-4100*
 🌐 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 ♿ *Accessibility: CONTACT PROVIDER*

GYNECOLOGY

CALDERON, JORGE

Provider ID: 206292
Provider Gender: Male
License Number: A40480
NPI: 1407800881
 🗣 *Provider English Spoken: Y*
 🗣 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, LOMPOC VALLEY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 206292
Provider Gender: Female
License Number: A131952
NPI: 1306280607
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD

SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 206292
Provider Gender: Female
License Number: A101017
NPI: 1073650339
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 206292
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

INTERNAL MEDICINE

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CHEN, TSUH-YIN

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DELAROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,




SCRIPPS MERCY HOSPITAL

CHULA VISTA, CHULA VISTA

COMM HOSP







Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



HURST, MICHAEL

Provider ID: 206292
 Provider Gender: Male
 License Number: 20A8081
 NPI: 1205893104
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SUTTER
 TRACY COMMUNITY HOSP,
 SCRIPPS MEMORIAL
 HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: [www.syhealth.org/clinics/san-ysidro-health](http://www.syhealth.org/clinics/san-ysidro-health-center)

- center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-8PM
 SA 8AM-2PM








INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292
 Provider Gender: Male
 License Number: G80107
 NPI: 1710082789
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: [www.syhealth.org/clinics/san-ysidro-health](http://www.syhealth.org/clinics/san-ysidro-health-center)
 - center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM



INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469
 Provider Gender: Male
 License Number: G80107
 NPI: 1710082789
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292
 Provider Gender: Female
 License Number: G71855
 NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

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Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZSANCHEZ, CLAUDIA

Provider ID: 206292

Provider Gender: Female

License Number: A160493

NPI: 1659720555

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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C. دليل الرعاية الأولية

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

REDDY, SAMATHHA
Provider ID: 227469
Provider Gender: Female
License Number: A120797
NPI: 1659620854
Provider English Spoken: Y
Provider Language(s)
Spoken: Gujarati, Hindi,
Punjabi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SHARP CHULA VISTA MED
CTR, ST AGNES MEDICAL

CENTER
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA
Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA
Provider ID: 206292
Provider Gender: Female
License Number: G81461
NPI: 1821299520
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

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C. دليل الرعاية الأولية


SHEIKH MOHAMED, AMIRA


Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, French, Hindi, Italian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

INTERNAL MEDICINE


SY, RAMON


Provider ID: 227469

Provider Gender: Male

License Number: A51843

NPI: 1982617403

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


VELAZQUEZ CAMARENA, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)


662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

INTERNAL MEDICINE GERIATRIC MEDICINE


PANDIT, IVY

Provider ID: 206292

Provider Gender: Female


License Number: C53735


NPI: 1891796165


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: KAISER FOUNDATION HOSPITAL RIVERSIDE, RIVERSIDE

COUNTY REGIONAL MED CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 205-1950

 After Hours Phone: (619) 205-1950


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914


NPI: 1982812392


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY


BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543

NPI: 1912159674


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

CARR, MIANDA


Provider ID: 227411

Provider Gender: Female

License Number: A104660

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1083815823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: ST

JOSEPHS MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA


Provider ID: 206292

Provider Gender: Female

License Number: A104660

NPI: 1083815823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: ST

JOSEPHS MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CARSON, LATISA

Provider ID: 206292

Provider Gender: Female

License Number: A72235

NPI: 1245229129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292

Provider Gender: Male

License Number: A63844

NPI: 1891867412

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP MARY BIRCH HOSP

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FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
Fax: (619) 205-1948

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 227411

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 206292

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996


📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 227411

Provider Gender: Female

License Number: A175006

NPI: 1255878997

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 206292

Provider Gender: Female

License Number: A175006

NPI: 1255878997

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Min/Max Age: 0\None

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 206292

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABI ADE

Provider ID: 206292

Provider Gender: Male

License Number: A114893

NPI: 1750559589

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL




Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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C. دليل الرعاية الأولية

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL

CENTER, SHARP MEMORIAL


HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female

License Number: A74960

NPI: 1801971569

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND


Provider ID: 206292

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 227411

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CHULA VISTA MED CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 227411

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

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Spoken: Faroese, Farsi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR, SCRIPPS MERCY
 HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411
 Provider Gender: Female
 License Number: A72721
 NPI: 1518970037
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR, SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

NISSAN, BETI

Provider ID: 206292
 Provider Gender: Female
 License Number: A64487
 NPI: 1396705299
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, HOLLYWOOD
 PRESBYTERIAN MED CTR,
 SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM




PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 206292
 Provider Gender: Female
 License Number: A93785
 NPI: 1669680351
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS



RODRIGUEZ, ALDO

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651


 Provider English Spoken: Y
 Provider Language(s) Spoken: Portuguese, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male


License Number: A170141


NPI: 1194257386


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-7:30PM
SA 8:30AM-2PM

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

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DIEGO

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female

License Number: A169577

NPI: 1790216422

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

TAYLOR, TASHA

Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: PA18363




NPI: 1215909205

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 206292
 Provider Gender: Male
 License Number: PA16994
 NPI: 1023207404
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, French, Spanish

Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469
 Provider Gender: Female
 License Number: PA58672
 NPI: 1013516996


Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

KAMOTO, LYNN

Provider ID: 206292
 Provider Gender: Female
 License Number: PA17162
 NPI: 1447326459

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

PORTOMADURSKI, KRISTINE

Provider ID: 227411
 Provider Gender: Female
 License Number: PA16269
 NPI: 1053403782

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL): NPI: 1619100237

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 206292

Provider Gender: Female


License Number: PA20490


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292

Provider Gender: Male

License Number: PA12304

NPI: 1902016611


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292




Provider Gender: Male

License Number: PA15656

NPI: 1285806794

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C. دليل الرعاية الأولية

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 227469

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 206292

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607

NPI: 1134732522

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA


Provider ID: 206292

Provider Gender: Female


License Number: SP9075


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


NPI: 1043950751


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738


NPI: 1114336260


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Providence
St Mary Medical Center

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

SANTEE


PEDIATRICS


ARLATA, TAMANTHA

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 9600 CUYAMACA ST STE
101

SANTEE, CA 92071

 Phone: (619) 749-2150

Fax: (619) 456-9744

 After Hours Phone: (619)
749-2150


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT


HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 9600 CUYAMACA ST STE
101

SANTEE, CA 92071

 Phone: (619) 749-2150

Fax: (619) 456-9744

 After Hours Phone: (619)
749-2150



 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY



Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO





 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 *Phone: (619) 515-2555*
 *After Hours Phone: (619) 515-2555*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA



Provider ID: 206361




Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 *Phone: (619) 515-2555*
 *After Hours Phone: (619) 515-2555*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*



FAMILY PRACTICE



BACHARACH, REBECCA
Provider ID: 206361
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 *Phone: (619) 515-2555*

 *After Hours Phone: (619) 515-2555*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CARDONES, ARTHUR
Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 *Phone: (619) 515-2555*
 *After Hours Phone: (619) 515-2555*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CONSTANTINO, STEPHANIE

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059

NPI: 1588677314

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: 206361

NPI: 1508801069

Provider English Spoken: Y
Cultural Competency: N

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

Fax: (619) 462-5584

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

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OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)

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515-2555


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)

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Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
 Provider ID: 206361
 Provider Gender: Female
 License Number: A116680
 NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:

GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA
 Provider ID: 206361
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
 Provider ID: 206361
 Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

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 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


WINESBURG, JENNIFER

Provider ID: 206361

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,


DESERT REGIONAL MED CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 *8788 JAMACHA RD
SPRING VALLEY, CA 91977*

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

 *Website: www.fhcsd.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:30AM-5:30PM*

TU 8:30AM-7PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206361

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 *8788 JAMACHA RD
SPRING VALLEY, CA 91977*

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

 *Website: www.fhcsd.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 *8788 JAMACHA RD
SPRING VALLEY, CA 91977*

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

PEDIATRICS

JI, AMANDA

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8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206361
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
Fax: (360) 462-2750

After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918
Provider Gender: Male
License Number: A114419
NPI: 1154583128

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9912

🕒 After Hours Phone: (760)
742-9912

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

🕒 After Hours Phone: (760)
742-9919

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

☐ Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

🕒 After Hours Phone: (760)
742-9919

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

CRAYCHEE, LEO

Provider ID: 71887

Provider Gender: Male

NPI: 1265432710

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

📍 28714 VALLEY CENTER RD
STE L
VALLEY CENTER, CA 92082

☎ Phone: (760) 749-7770

Fax: (760) 751-9988

🕒 After Hours Phone: (760)
749-7770


🌐 Website: N/A


Medi-Cal Open Panel: Yes

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Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT



AGUEY, OMAR

Provider ID: 519918

Provider Gender: Male

License Number: PA18708


NPI: 1851479372

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

VISTA

CERTIFIED NURSE PRACTITIONER



HALGEDAHL, YI TING

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826


NPI: 1619246907


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER



KELLEHER, BRIDGET

Provider ID: 400339

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER


WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female


License Number: NP95020624


NPI: 1225500259

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000





 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org






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nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR







JU, NATHANIEL
 Provider ID: 400339
 Provider Gender: Male
 License Number: DC32054
 NPI: 1972883882
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM
 TU 10:30AM-7:30PM
 W-F 8AM-5PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
 Provider ID: 400339
 Provider Gender: Female
 License Number: 20A12958
 NPI: 1003172016
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, TRI CITY MEDICAL
 CTR
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KETCHEL, CLINT
 Provider ID: 400339
 Provider Gender: Male
 License Number: A135564
 NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Chaldean
 Neo-Aramaic, Spanish,
 Syriac
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, TRI
 CITY MEDICAL CTR, WHITTIER
 HOSPITAL MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM
 TU 10:30AM-7:30PM
 W-F 8AM-5PM

FQHC

VCC DURIAN,
 Provider ID: 411518
 NPI: 1851300123
 Provider English Spoken: Y

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Cultural Competency: N
IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FQHC

**VISTA COMMUNITY CLINIC
GRAPEVINE,**

Provider ID: 400339

NPI: 1851300123

Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

AMBO, STANLEY

Provider ID: 52269

Provider Gender: Male

NPI: 1891735676

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

ASSELIN, LYNETTE

Provider ID: 65507

Provider Gender: Female

NPI: 1053484568

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2067 W VISTA WAY STE
280

VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6PM
SA 9AM-1PM

PEDIATRICS

BEDROSIAN, DIANE

Provider ID: 80272

Provider Gender: Female

NPI: 1447323951

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C. دليل الرعاية الأولية

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2067 W VISTA WAY STE 280
 VISTA, CA 92083
 Phone: (760) 941-3630
 Fax: (760) 941-1214
 After Hours Phone: (760) 941-3630
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6PM SA 9AM-1PM

PEDIATRICS

CASTRO, JORGE

Provider ID: 100779

Provider Gender: Male

NPI: 1326082868

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL
 ENCINITAS, RADY CHILDRENS
 HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

2067 W VISTA WAY STE 180
 VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760) 945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A
 VISTA, CA 92083

Phone: (844) 308-5003

After Hours Phone: (844) 308-5003

Website: www.vistacommu

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

KARP, MICHAEL

Provider ID: 95672

Provider Gender: Male

NPI: 1295808632

Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

2067 W VISTA WAY STE 280
 VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760) 941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6PM SA 9AM-1PM

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C. دليل الرعاية الأولية

PEDIATRICS

KRAK, MICHAEL

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH
NETWORK

2067 W VISTA WAY STE
280

VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6PM
SA 9AM-1PM

PEDIATRICS

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

NAUDIN, VERONICA

Provider ID: 84118

Provider Gender: Female

NPI: 1093755878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-0PM

PEDIATRICS

PERTL, URSULA

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

CHILDRENS HOSP OF LOS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ANGELES

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434
Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-2PM
M-F 8AM-5PM
SA 8AM-0PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-2PM
F 8AM-5PM
SA 8AM-4PM

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ALPINE

OPTOMETRIST

AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (800) 898-2020
Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

PSYCHOLOGIST

TORRES, RANDALL

Provider ID: 306854

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1871696435

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

BRAWLEY

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 256218

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

207 W LEGION RD
BRAWLEY, CA 92227

Phone: (760) 351-3291

After Hours Phone: (760)
351-3291

Provider Gender: Male

NPI: 1417222472

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 256195

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

207 W LEGION RD
BRAWLEY, CA 92227

Phone: (760) 351-7643

After Hours Phone: (760)
351-7643

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

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Network

CAMPO

FAMILY PRACTICE

BAUM, PETER

Provider ID: 296383

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROGERS, MATTHEW

Provider ID: 294843

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1639606130

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CARLSBAD

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)

884-5990

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1902470537

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC


DERMATOLOGY

ZUBAIR, RAHEEL


Provider ID: 306519
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

 6010 HIDDEN VALLEY RD
 STE 120
 CARLSBAD, CA 92011


 Phone: (760) 448-4484
 Fax: (760) 448-4404


 After Hours Phone: (760)
 448-4484


Provider Gender: Male
 NPI: 1326493024

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

FAMILY PRACTICE


CHAVEZSANTOS, MARIA

Provider ID: 307651

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP



 1295 CARLSBAD VILLAGE

DR STE 100
 CARLSBAD, CA 92008

 Phone: (760) 736-6767
 Fax: (760) 720-7204

 After Hours Phone: (760)
 736-6767

Provider Gender: Female
 NPI: 1780061440


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP


HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268654

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

 1820 MARRON RD STE 102
 CARLSBAD, CA 92008

 Phone: (760) 434-0125
 Fax: (760) 434-4531


 After Hours Phone: (760)
 434-0125


Provider Gender: Female
 NPI: 1902853344

 Provider English Spoken: Y

Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

 Website: N/A


IPA: Community Care IPA LLC


NEUROLOGY

DROKER, BRIAN

Provider ID: 306953



Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011

 Phone: (760) 631-3000
 Fax: (760) 270-9534

 After Hours Phone: (760)
 631-3000

Provider Gender: Male
 NPI: 1801112669

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M 8AM-5PM
 W 8AM-5PM

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 Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY


YOSHII-CONTRERAS, JUNE

Provider ID: 296589


Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011


 Phone: (760) 631-3000

Fax: (760) 631-3016

 After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1437441763

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

TRI CITY MEDICAL CTR,

SCRIPPS MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

OTOLARYNGOLOGY


CHANG, EDWARD

Provider ID: 309534

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2390 FARADAY AVE

CARLSBAD, CA 92008


 Phone: (858) 909-0770

Fax: (858) 909-0880

 After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1528146008

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

OTOLARYNGOLOGY


DONALDSON, CHADWICK

Provider ID: 268146

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2390 FARADAY AVE

CARLSBAD, CA 92008


 Phone: (858) 909-0770

Fax: (858) 909-0880

 After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1891743910

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

TEMECULA VALLEY HOSPITAL

INC, SCRIPPS MEMORIAL

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, Sharp Grossmont

Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN

Provider ID: 269004

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 6010 HIDDEN VALLEY RD

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D. دليل مقدمي الخدمات المتخصصين

STE 200
CARLSBAD, CA 92011
☎ Phone: (760) 631-3000
☎ Fax: (760) 631-3016
🕒 After Hours Phone: (760)
631-3000
Provider Gender: Female
NPI: 1598160343
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-4PM
🌐 Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

INOCELDA, ANDREW
Provider ID: 269089
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
☎ Phone: (760) 631-3000
☎ Fax: (760) 631-3016
🕒 After Hours Phone: (760)
631-3000
Provider Gender: Male
NPI: 1497950208
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

SHIMIZU, KELSIE
Provider ID: 296819
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 2390 FARADAY AVE
CARLSBAD, CA 92008
☎ Phone: (858) 909-0770
☎ Fax: (858) 909-0880
🕒 After Hours Phone: (858)
909-0770
Provider Gender: Female
NPI: 1972107811
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KECK
HOSPITAL OF USC, USC
KENNETH NORRIS JR
CANCER HOSPITAL, USC
VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WILAND, WINONA
Provider ID: 296809
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 2390 FARADAY AVE
CARLSBAD, CA 92008
☎ Phone: (858) 909-0770
☎ Fax: (858) 909-0880
🕒 After Hours Phone: (858)
909-0770
Provider Gender: Female
NPI: 1043967383
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER
Provider ID: 248010
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 3070 MADISON ST
CARLSBAD, CA 92008
☎ Phone: (760) 434-6100
☎ Fax: (760) 471-5139

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (760) 591-7750

Provider Gender: Male

NPI: 1114977535

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 7AM-7PM

TU 7AM-5PM

W 7AM-7PM

TH 7AM-5PM

F 7AM-7PM

🌐 Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

MC GEE, JACQUELINE

Provider ID: 252472

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 3070 MADISON ST
CARLSBAD, CA 92008

☎ Phone: (760) 434-6100

Fax: (760) 434-4583

☎ After Hours Phone: (760) 434-6100

Provider Gender: Female

NPI: 1194217133

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 7AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244069

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942469663

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270283

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1215176839

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299996

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 203510

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (619) 543-5540

After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1609130921

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CHULA VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300088

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299879

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100



American Sign Language (ASL):
N

Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE



LERNER, JONATHAN

Provider ID: 303445
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male


NPI: 1962899823

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED ACUPUNCTURIST



LAM, KHANH

Provider ID: 295381
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 340 4TH AVE STE 19
CHULA VISTA, CA 91910
 Phone: (619) 761-5308
Fax: (619) 591-1910

 After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1649594979


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, French,
Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH



Provider ID: 290591
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-1184

 After Hours Phone: (619)

662-4100

Provider Gender: Female

NPI: 1598037178

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A


IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

ARMSTON, LINDSEY

Provider ID: 309664
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 Phone: (619) 425-3840
Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1841851375

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER


BRACEY-ASIEDU,

ALEKSANDRYA

Provider ID: 309695

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 450 4TH AVE STE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1336625524

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER


BRAYTENBAH, MELANIE

Provider ID: 295830


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Female

NPI: 1508370875


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

CERTIFIED NURSE PRACTITIONER

BRAYTENBAH, MELANIE


Provider ID: 262342

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

 752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Female


NPI: 1508370875


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

CERTIFIED NURSE PRACTITIONER


BRAYTENBAH, MELANIE

Provider ID: 268746

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)

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D. دليل مقدمي الخدمات المتخصصين

421-3361
Provider Gender: Female
NPI: 1508370875
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

CERTIFIED NURSE PRACTITIONER

CARRION GELABERT, ANA
Provider ID: 302402
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910
 Phone: (619) 425-3840
Fax: (619) 425-3842
 After Hours Phone: (619)
425-3840
Provider Gender: Female
NPI: 1023178233
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 302418
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 Phone: (619) 425-3840
Fax: (619) 369-4880
 After Hours Phone: (619)
425-3840
Provider Gender: Female
NPI: 1528632742
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 308352
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 855 THIRD AVESTE 2220
CHULA VISTA, CA 91911
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1114957289
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

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D. دليل مقدمي الخدمات المتخصصين

PRACTITIONER		
LANE, KIMBERLY	Provider Gender: Female NPI: 1497067862	Min/Max Age: 0\None American Sign Language (ASL): N
Provider ID: 301598 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: BEVERLY HOSPITAL, TRI CITY MEDICAL CTR	Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM Website: N/A IPA: IHP of Southern Cal-PHP
752 MEDICAL CENTER CT STE 101 CHULA VISTA, CA 91911 Phone: (619) 397-4500 Fax: (858) 429-7931 After Hours Phone: (619) 397-4500	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	
Provider Gender: Female NPI: 1457670119	Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM Website: N/A IPA: IHP of Southern Cal-PHP	
Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 16\None American Sign Language (ASL): N		
Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP		
EMERGENCY MEDICINE		
DILLMAN, ARIANA	Provider ID: 290495 Board Certified Specialty: Yes IHP OF SOUTHERN CAL-PHP	
333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (661) 205-6305 After Hours Phone: (619) 662-4100	333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100	
Provider Gender: Male NPI: 1154683787	Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: CORONA REGIONAL MED CTR Medi-Cal Open Panel: Yes	
		Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER
EMERGENCY MEDICINE		
EINSTEIN, ERIC	Provider ID: 290482 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	
333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100	333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100	
Provider Gender: Female NPI: 1770578411	Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	
		Accessibility: CONTACT PROVIDER

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🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

GALASSO, MADISON

Provider ID: 290477
Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
📞 Phone: (619) 662-4100
Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1053766766

🗳️ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

GRIESINGER, MICHAEL

Provider ID: 290537
Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

📍 333 H ST STE 2080
CHULA VISTA, CA 91910

📞 Phone: (619) 662-4100
Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Male
NPI: 1336556604

🗳️ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Adventist
Health Bakersfield, SAN

JOAQUIN GENERAL HOSP

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304935
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 386 E H ST STE 202
CHULA VISTA, CA 91910

📞 Phone: (858) 966-1720
Fax: (858) 966-1725

🕒 After Hours Phone: (858)

966-1720

Provider Gender: Female
NPI: 1811423072

🗳️ Provider English Spoken: Y
🗳️ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

🌐 Website: N/A
IPA: Rady Childrens Health
Network

EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 290637
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 333 H ST STE 2080
CHULA VISTA, CA 91910

📞 Phone: (619) 662-4100
Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1295112670

🗳️ Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

EMERGENCY MEDICINE

REARDON, JACQUELINE

Provider ID: 290673
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1417928557
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

ROXAS, ROGER

Provider ID: 290600
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1578910840
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 290970
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 425-1184
🕒 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1649628587

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-8PM
SA 8AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

DEIS, CRISTINA

Provider ID: 302757

Board Certified Specialty: No

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RADY CHILDRENS HEALTH NETWORK

1637 THIRD AVENUE
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1639478811
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 299164
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619)

662-4100
Provider Gender: Female
NPI: 1972732584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

SHAFFER, KATHERINE

Provider ID: 305510
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
296 H ST STE 301
CHULA VISTA, CA 91910
Phone: (619) 266-3332
After Hours Phone: (619) 266-3332
Provider Gender: Female
NPI: 1336405695
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

WIENER, GREGORY

Provider ID: 290741
Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Phone: (619) 585-8883
Fax: (619) 585-0166
After Hours Phone: (619) 585-8883
Provider Gender: Male
NPI: 1811099534
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA






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D. دليل مقدمي الخدمات المتخصصين

VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL): VISTA
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-4:30PM
 F 8:30AM-3PM
 Website: N/A
 IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PPP

GASTROENTEROLOGY






WIENER, GREGORY




Provider ID: 257480
 Board Certified Specialty: Yes
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 353 CHURCH AVE STE A
 CHULA VISTA, CA 91910
 Phone: (619) 585-8883
 Fax: (619) 585-0166
 After Hours Phone: (619)
 585-8883
 Provider Gender: Male
 NPI: 1811099534
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA
 VISTA MED CTR, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-4:30PM
 F 8:30AM-3PM
 Website: N/A
 IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PPP

GENERAL PRACTICE



SAMI, REMAN

Provider ID: 295214
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PPP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 425-1184
 After Hours Phone: (619)
 662-4100
 Provider Gender: Female
 NPI: 1295362242
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PPP


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268688
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 310 3RD AVE STE C11
 CHULA VISTA, CA 91910
 Phone: (619) 426-0841
 Fax: (619) 426-9197



 After Hours Phone: (619)
 426-0841

Provider Gender: Female
 NPI: 1063558856

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A

IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 268651

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

HEMATOLOGY / ONCOLOGY

JOHNSON, KENNETH

Provider ID: 262288

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911

Phone: (619) 482-8430

Fax: (619) 482-8005

After Hours Phone: (619)
482-8430

Provider Gender: Male

NPI: 1063527711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Imperial Health Holdings
Medical Group-SD

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309249

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP




CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None




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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): CHULA VISTA MED CTR
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC


Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD






INTERVENTIONAL CARDIOLOGY

NAGHI, JESSE

Provider ID: 247625
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 752 MEDICAL CENTER CT
 STE 207
 CHULA VISTA, CA 91911
 Phone: (619) 867-0557
 Fax: (619) 867-0558
 After Hours Phone: (619)
 867-0557
 Provider Gender: Male
 NPI: 1386896736
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Bulgarian,
 Russian, Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MEMORIAL
 HOSPITAL, GROSSMONT
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL, ALVARADO
 HOSPITAL LLC, SHARP CHULA
 VISTA MED CTR, SHARP







INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302985
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 754 MEDICAL CENTER CT
 STE 101
 CHULA VISTA, CA 91911
 Phone: (619) 434-4208
 Fax: (619) 434-4315
 After Hours Phone: (619)
 434-4208
 Provider Gender: Male
 NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 298442
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 754 MEDICAL CENTER CT
 STE 101
 CHULA VISTA, CA 91911
 Phone: (619) 434-4208
 Fax: (619) 434-4315
 After Hours Phone: (619)
 434-4208
 Provider Gender: Male
 NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP,
 Imperial Health Holdings
 Medical Group-SD

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 268950
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 📍 752 MEDICAL CENTER CT
 STE 207
 CHULA VISTA, CA 91911
 📞 Phone: (619) 867-0557
 Fax: (619) 867-0558
 📞 After Hours Phone: (619)
 867-0557
 Provider Gender: Male
 NPI: 1154323996
 📄 Provider English Spoken: Y
 📄 Provider Language(s)
 Spoken: Bulgarian, Russian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, ALVARADO
 HOSPITAL LLC, SHARP CHULA
 VISTA MED CTR, TRI CITY
 MEDICAL CTR, TRI CITY
 MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA
 VISTA, Sharp Grossmont
 Hospital, SHARP CORONADO
 HOSP AND HEALTHCARE CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296051
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 📍 765 MEDICAL CENTER CT
 STE 211
 CHULA VISTA, CA 91911
 📞 Phone: (619) 616-2100
 Fax: (619) 616-2104
 📞 After Hours Phone: (619)
 616-2100
 Provider Gender: Female
 NPI: 1811307051
 📄 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital, SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Yes

Min/Max Age: 15\99
 American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A


IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295846
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 📍 765 MEDICAL CENTER CT
 STE 211
 CHULA VISTA, CA 91911
 📞 Phone: (619) 616-2100
 Fax: (619) 616-2104
 📞 After Hours Phone: (619)
 616-2100
 Provider Gender: Female
 NPI: 1811307051
 📄 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital, SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 15\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 309098
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

 Phone: (760) 294-0480
Fax: (760) 294-0481

 After Hours Phone: (760)
294-0480

Provider Gender: Female
NPI: 1811307051


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

Provider ID: 277263

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710


Provider Gender: Female
NPI: 1639153018


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network



Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710


Provider Gender: Female
NPI: 1124413026


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish


Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294653

Board Certified Specialty: No

MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296993

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RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264687

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 242523

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205646

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

435 H ST
CHULA VISTA, CA 91910

Phone: (619) 691-7000

After Hours Phone: (619)

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D. دليل مقدمي الخدمات المتخصصين

691-7000
 Provider Gender: Female
 NPI: 1679809826
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
 Provider ID: 297976
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 435 H ST
 CHULA VISTA, CA 91910
 Phone: (619) 691-7000
 Fax: (619) 260-7055
 After Hours Phone: (619) 691-7000
 Provider Gender: Female
 NPI: 1801952197
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Japanese
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA
 Provider ID: 262159
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 435 H ST
 CHULA VISTA, CA 91910
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818
 Provider Gender: Female
 NPI: 1497941397
 Provider English Spoken: Y
 Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish
 Cultural Competency: N
 Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
 Provider ID: 301823
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 435 H ST
 CHULA VISTA, CA 91910
 Phone: (619) 691-7000
 Fax: (619) 260-7055
 After Hours Phone: (619) 691-7000
 Provider Gender: Female
 NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY

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D. دليل مقدمي الخدمات المتخصصين


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE


SPEZIALE, MARK

Provider ID: 304829


Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 435 H ST

CHULA VISTA, CA 91910

 Phone: (619) 691-7000

Fax: (619) 260-7055

 After Hours Phone: (619) 691-7000

Provider Gender: Male

NPI: 1801978143

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD


MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL


ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

NEPHROLOGY


HOREISH, ADAM

Provider ID: 99947


Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

 340 4TH AVE STE 4

CHULA VISTA, CA 91910

 Phone: (619) 427-1144

Fax: (619) 427-1185

 After Hours Phone: (619) 427-1144

Provider Gender: Male

NPI: 1760461206

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,


PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

NEPHROLOGY


HOREISH, ADAM

Provider ID: 99947

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

 340 4TH AVE STE 4

CHULA VISTA, CA 91910


 Phone: (619) 427-1144


Fax: (619) 427-1185

 After Hours Phone: (619) 427-1144

Provider Gender: Male

NPI: 1760461206

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

NEPHROLOGY

HOREISH, ADAM

Provider ID: 290100
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 340 4TH AVE STE 4
CHULA VISTA, CA 91910
☎ Phone: (619) 427-1144
Fax: (619) 427-1185
📞 After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206
📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,

PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

NEPHROLOGY

PATEL, AMAR

Provider ID: 245639
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 340 4TH AVE STE 4
CHULA VISTA, CA 91910
☎ Phone: (619) 427-1144
Fax: (619) 427-1185
📞 After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1821359605
📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

NEPHROLOGY

PHAM, JENNIFER

Provider ID: 302863
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 340 FOURTH AVE STE 4
CHULA VISTA, CA 91910
☎ Phone: (619) 427-1144
Fax: (619) 427-1185
📞 After Hours Phone: (619)
427-1144
Provider Gender: Female
NPI: 1235629932
📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: IHP of Southern Cal-PHP


Imperial Health Holdings
Medical Group-SD


Medical Group-SD

NEPHROLOGY


VIDEEN, JOHN

Provider ID: 65646
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM


 Website: N/A


IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,


VIDEEN, JOHN

Provider ID: 290110
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP,


Imperial Health Holdings

NEPHROLOGY


VIDEEN, JOHN

Provider ID: 262286
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Medical Group-SD

NEPHROLOGY

YUAN, HENRY

Provider ID: 268551

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1043442379

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, PARADISE

VALLEY HOSPITAL, Providence

St Joseph Hospital, Providence

St Jude Medical Center,

SOUTH COAST GLOBAL

MEDICAL CENTER INC,

ENCOMPASS HEALTH

REHABILITATION HOSPITAL

OF TUSTIN, Foothill Regional

Medical Center, Foothill

Regional Medical Center,

KINDRED HOSPITAL BREA,

KINDRED HOSPITAL LA

MIRADA, KINDRED HOSPITAL

SANTA ANA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

NEUROLOGY

GUPTA, MONIKA

Provider ID: 307937

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1922243401

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA

VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304999

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 485-5440

After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1316471485

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS

Provider ID: 309932

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1205084183

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, MAYERS

MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM

Provider ID: 306707

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1881182079

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Spanish,

Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

MOHAMMAD, AHMADSHAH

Provider ID: 127244

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

750 MEDICAL CENTER CT
STE 6

CHULA VISTA, CA 91911

Phone: (619) 337-7900

Fax: (619) 337-7902

After Hours Phone: (619)
337-7900

Provider Gender: Male

NPI: 1902973472

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Farsi,

French, German, Pashto,

Persian, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

NEUROLOGY

SORIALOPEZ, JOSE

Provider ID: 295744

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

450 4TH AVE STE 215

CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 485-5440

After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1225474034

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, SCRIPPS MERCY
 HOSPITAL CHULA VISTA,
 TEMECULA VALLEY HOSPITAL
 INC
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-6PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 290331
 Board Certified Specialty: Yes
 IHP OF SOUTHERN CAL-PHP
 752 MEDICAL CENTER CT
 STE 106
 CHULA VISTA, CA 91911
 Phone: (619) 482-8406
 Fax: (619) 482-6656
 After Hours Phone: (619)
 482-8406
 Provider Gender: Male
 NPI: 1033138714
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 13\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-5PM
 F 8AM-0PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 268953
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 752 MEDICAL CENTER CT
 STE 106
 CHULA VISTA, CA 91911
 Phone: (619) 482-8406
 Fax: (619) 482-6656
 After Hours Phone: (619)
 482-8406
 Provider Gender: Male
 NPI: 1033138714
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 PARADISE VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-5PM
 F 8AM-0PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

OCCUPATIONAL THERAPIST

MORRIS, SHEILA

Provider ID: 268926
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1020 TIERRA DEL REY STE
 A-1
 CHULA VISTA, CA 91910
 Phone: (619) 585-7104
 Fax: (619) 585-7106
 After Hours Phone: (619)
 585-7104
 Provider Gender: Female
 NPI: 1689039877
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7AM-6PM
 SA 7AM-2PM
 Website: N/A
 IPA: Community Care IPA LLC

OPHTHALMOLOGY

GOLDMAN, DAVID

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider ID: 308450
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

311 DEL MAR AVE
CHULA VISTA, CA 91910

Phone: (619) 427-3355

Fax: (619) 427-0955

After Hours Phone: (619)
427-3355

Provider Gender: Male

NPI: 1629185467

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPHTHALMOLOGY

GOLDMAN, DAVID

Provider ID: 308604

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

311 DEL MAR AVE
CHULA VISTA, CA 91910

Phone: (619) 427-3355

Fax: (619) 427-0955

After Hours Phone: (619)
427-3355

Provider Gender: Male

NPI: 1629185467

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPHTHALMOLOGY

HO, AMIEE

Provider ID: 297633

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1396009478

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

CHAIN, PEI CHI

Provider ID: 297621

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-2025

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1730676727

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 304537

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

835 THIRD AVE STE A
CHULA VISTA, CA 91911

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D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (619) 425-7755

Fax: (619) 425-2138

📞 After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 306902

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 835 THIRD AVE STE A
CHULA VISTA, CA 91911

☎ Phone: (619) 425-7755

Fax: (619) 425-2138

📞 After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 304830

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

📞 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1669825667

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268680

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 440 4TH AVE STE 9

CHULA VISTA, CA 91910

☎ Phone: (619) 427-2020

Fax: (866) 254-5707

📞 After Hours Phone: (619) 427-2020

Provider Gender: Male

NPI: 1457507279

🗉 Provider English Spoken: Y

🗉 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
Imperial Health Holdings
Medical Group-SD

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268679

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 2260 OTAY LAKES RD STE
111

CHULA VISTA, CA 91915

☎ Phone: (619) 421-5550

Fax: (866) 254-5707

📞 After Hours Phone: (619) 421-5550

Provider Gender: Male

NPI: 1457507279

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y N
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: No
 Min/Max Age: 0\None
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-6PM

Website: N/A

IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262229

Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

440 4TH AVE STE 9
 CHULA VISTA, CA 91910

Phone: (619) 427-2020

Fax: (866) 254-5707

After Hours Phone: (619) 427-2020

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-6PM

Website: N/A

IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262228

Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

2260 OTAY LAKES RD STE 111

CHULA VISTA, CA 91915

Phone: (619) 421-5550

Fax: (866) 254-5707

After Hours Phone: (619) 421-5550

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-6PM

Website: N/A

IPA: Community Care IPA LLC,

Imperial Health Holdings Medical Group-SD

OPTOMETRIST

NGUYEN, THU

Provider ID: 298022

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP, Imperial Health Holdings

Medical Group-SD

OPTOMETRIST

NGUYEN, THU

Provider ID: 125032

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471
Fax: (619) 422-0450

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

OPTOMETRIST

NGUYEN, THU

Provider ID: 265518

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

OPTOMETRIST

RICHARDSON, JULIA

Provider ID: 297645

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-2025

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1770154528

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

SCOVILL, ALEXANDRA

Provider ID: 297625

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0114

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1184146094

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TRAN, JESSICA

Provider ID: 304888

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

340 FOURTH AVESTE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OTOLARYNGOLOGY

CHANG, EDWARD

Provider ID: 309536

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

577 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 426-5181

Fax: (619) 426-0714

After Hours Phone: (619)
426-5181

Provider Gender: Male

NPI: 1528146008

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

OTOLARYNGOLOGY

MCCALLION, PATRICK

Provider ID: 290541

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)
482-0565

Provider Gender: Male

NPI: 1134144454

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302432

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)
482-0565

Provider Gender: Male

NPI: 1518456508

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA
Provider ID: 303782
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1851927883
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1366622078
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 275787

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725

After Hours Phone: (858) 966-1720

Provider Gender: Female
NPI: 1316162324

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW
Provider ID: 297176
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202

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D. دليل مقدمي الخدمات المتخصصين

CHULA VISTA, CA 91910
☎ Phone: (858) 966-1720
Fax: (858) 966-1725
🕒 After Hours Phone: (858) 966-1720
Provider Gender: Male
NPI: 1942223664
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295669
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 386 E H ST STE 202
CHULA VISTA, CA 91910
☎ Phone: (858) 966-1720
Fax: (858) 966-1725
🕒 After Hours Phone: (858)

966-1720
Provider Gender: Female
NPI: 1134681265
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 289411
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 386 E H ST STE 202
CHULA VISTA, CA 91910
☎ Phone: (858) 966-1720
Fax: (858) 966-1725
🕒 After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1083840920
🗉 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network




PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 306065
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 280 E ST
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 426-2170
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1992876759
🗉 Provider English Spoken: Y
🗉 Provider Language(s) Spoken: Persian
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\17
American Sign Language (ASL):

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N


 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-5PM
 **Website:** N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295275
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 340 4TH AVE STE 19
 CHULA VISTA, CA 91910

 **Phone:** (760) 607-5350
Fax: (760) 607-5365

 **After Hours Phone:** (760) 607-5350

Provider Gender: Male

NPI: 1407052459

 **Provider English Spoken:** Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, PALOMAR MEDICAL
 CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-5PM

 **Website:** N/A

IPA: IHP of Southern Cal-PHP


PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 302126

Board Certified Specialty: No
**RADY CHILDRENS HEALTH
 NETWORK**

 280 E ST
 CHULA VISTA, CA 91910



 **Phone:** (619) 662-4100

Fax: (619) 662-4196

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

Provider Gender: Male

NPI: 1023207404

 **Provider English Spoken:** Y
 **Provider Language(s)
 Spoken:** Chinese, French,
 Spanish

Cultural Competency: N


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-5PM

 **Website:** N/A

IPA: Rady Childrens Health
 Network

PHYSICIANS ASSISTANT


GUTH, CARA

Provider ID: 299110

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 480 4TH AVE STE 501

CHULA VISTA, CA 91910

 **Phone:** (619) 425-9510

Fax: (858) 455-7197

 **After Hours Phone:** (619) 425-9510

Provider Gender: Female

NPI: 1992177182


 **Provider English Spoken:** Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):
 N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 9AM-5PM

 **Website:** N/A

IPA: IHP of Southern Cal-PHP


PHYSICIANS ASSISTANT

INDA, PRISCILLA

Provider ID: 309072

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 429 BROADWAY
 CHULA VISTA, CA 91910


 **Phone:** (619) 434-0204


Fax: (619) 337-0191

 **After Hours Phone:** (619) 434-0204

Provider Gender: Female

NPI: 1679008379

 **Provider English Spoken:** Y

 **Provider Language(s)
 Spoken:** Arabic, Russian,
 Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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D. دليل مقدمي الخدمات المتخصصين

MERCY HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT


INDA, PRISCILLA

Provider ID: 265072


Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 450 4TH AVE STE 215 CHULA VISTA, CA 91910

 Phone: (619) 434-0204


Fax: (619) 337-0191

 After Hours Phone: (619) 434-0204

Provider Gender: Female

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic, Russian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT


MARISCAL, MIGUEL

Provider ID: 308408

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 855 THIRD AVE STE 2200 CHULA VISTA, CA 91911

 Phone: (619) 662-4100


Fax: (619) 662-4196

 After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1760508923

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT


VARGAS, CHRISTOPHER

Provider ID: 295945

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2452 FENTON ST STE C101 CHULA VISTA, CA 91914


 Phone: (619) 600-5309

Fax: (619) 655-4700

 After Hours Phone: (619) 600-5309

Provider Gender: Male

NPI: 1922505775

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT


VARGAS, CHRISTOPHER

Provider ID: 295828

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2452 FENTON ST STE C203 CHULA VISTA, CA 91914

 Phone: (619) 600-5309

Fax: (619) 655-4700

 After Hours Phone: (619)

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600-5309
 Provider Gender: Male
 NPI: 1922505775
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER
 Provider ID: 268744
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2452 FENTON ST STE C203
 CHULA VISTA, CA 91914
 Phone: (619) 600-5309
 Fax: (619) 655-4700
 After Hours Phone: (619)
 600-5309
 Provider Gender: Male
 NPI: 1922505775
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WRIGHT, DEREK
 Provider ID: 302389
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 340 FOURTH AVESTE 19
 CHULA VISTA, CA 91910
 Phone: (619) 761-5308
 Fax: (619) 591-1910
 After Hours Phone: (619)
 761-5308
 Provider Gender: Male
 NPI: 1629674858
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

Website: N/A
 IPA: IHP of Southern Cal-PHP

PODIATRIST

BRAZIER, SETH
 Provider ID: 306399
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 855 THIRD AVESTE 1100
 CHULA VISTA, CA 91911
 Phone: (619) 880-5057
 Fax: (858) 485-1515
 After Hours Phone: (619)
 880-5057
 Provider Gender: Male
 NPI: 1033554324
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: KAWEAH
 DELTA DISTRICT HOSP, SELMA
 COMMUNITY HOSPITAL,
 ADVENTIST MEDICAL
 CENTER, ADVENTIST MED CTR
 REEDLEY
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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D. دليل مقدمي الخدمات المتخصصين

PODIATRIST	PODIATRIST	PODIATRIST
<p>CAINE, SAMUEL Provider ID: 308636 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 345 F ST STE 100 CHULA VISTA, CA 91910 ☎ Phone: (619) 727-3481 ☎ Fax: (619) 420-7087 📞 After Hours Phone: (619) 727-3481 Provider Gender: Male NPI: 1396230298 📄 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N N 📄 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>	<p>CAINE, SAMUEL Provider ID: 308211 Board Certified Specialty: No COMMUNITY CARE IPA LLC 📍 345 F ST STE 100 CHULA VISTA, CA 91910 ☎ Phone: (619) 727-3481 ☎ Fax: (619) 420-7087 📞 After Hours Phone: (619) 727-3481 Provider Gender: Male NPI: 1396230298 📄 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 📄 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>	<p>DAVIDSONIII, JOHN Provider ID: 129545 Board Certified Specialty: No COMMUNITY CARE IPA LLC 📍 345 F ST STE 100 CHULA VISTA, CA 91910 ☎ Phone: (619) 427-3481 ☎ Fax: (619) 420-7807 📞 After Hours Phone: (619) 427-3481 Provider Gender: Male NPI: 1689069874 📄 Provider English Spoken: Y 📄 Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 📄 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 9AM-4:30PM 🌐 Website: N/A IPA: Community Care IPA LLC</p>
	<p>PODIATRIST</p>	<p>PODIATRIST</p>
		<p>READ, TRENTON Provider ID: 296655 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Phone: (619) 631-4033

Fax: (619) 880-5057

After Hours Phone: (619)
631-4033

Provider Gender: Male

NPI: 1952963431

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

PSYCHOLOGIST

BAYLON, ALDO

Provider ID: 290243

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1649429150

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

CELAYA, PATRICIA

Provider ID: 294875

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952656902

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GALLO, LINDA

Provider ID: 296782

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

780 BAY BLVD STE 200

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7852

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1427773621

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GOULD, HILARY

Provider ID: 290467

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 271-0260
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

WIJAYARATNE, IMANIE
Provider ID: 290092
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 245-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1932358355
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 5\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 303101
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (858) 939-5010
Fax: (619) 740-8499
After Hours Phone: (858) 939-5010
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 206393
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Female
NPI: 1053348920
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

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VOLPP, PAUL

Provider ID: 221102

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Phone: (619) 502-5851

Fax: (619) 502-5865

After Hours Phone: (619)
502-5851

Provider Gender: Male

NPI: 1225186232

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 307786

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-5PM

SA 8AM-1PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 304529

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TH 7AM-7PM

F 7AM-5PM

SA 8AM-1PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL

THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

880 THIRD AVESTE A
CHULA VISTA, CA 91911

Phone: (619) 205-4585

Fax: (619) 271-3183

After Hours Phone: (619)
205-4585

Provider Gender: Female

NPI: 1063170603

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 55\None

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين


<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<hr/> THERAPIST <hr/>	<p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1699357525</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>
<hr/> REGISTERED PHYSICAL THERAPIST <hr/>	<p>KARANDE, PRACHI</p> <p>Provider ID: 287100</p> <p>Board Certified Specialty: No</p> <p>COMMUNITY CARE IPA LLC</p> <p> 1392 E PALOMAR ST STE 503</p> <p>CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1699357525</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 16\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>	<hr/> REGISTERED PHYSICAL THERAPIST <hr/>
<p>JIMENEZ, ANDREA</p> <p>Provider ID: 299889</p> <p>Board Certified Specialty: No</p> <p>COMMUNITY CARE IPA LLC</p> <p> 1392 E PALOMAR ST STE 503</p> <p>CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1407440670</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<hr/> REGISTERED PHYSICAL THERAPIST <hr/>	<p>NGUYEN, TIA</p> <p>Provider ID: 305014</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 1392 E PALOMAR ST STE 503</p> <p>CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1457136269</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 7AM-7PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>	<p>KARANDE, PRACHI</p> <p>Provider ID: 301380</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 1392 E PALOMAR ST STE 503</p> <p>CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p>	
<hr/> REGISTERED PHYSICAL THERAPIST <hr/>		


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST


NGUYEN, TIA

Provider ID: 305013

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

REGISTERED PHYSICAL THERAPIST


NOVENCIDO, ANDREW

Provider ID: 286782

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW


Provider ID: 301994

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1392 E PALOMAR ST STE

503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST


SPARKS, TODD

Provider ID: 129142

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 7AM-7PM TU 7AM-0PM W-TH 7AM-7PM F 7AM-0PM
 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 301108
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP N

Accessibility: CONTACT PROVIDER
 Hours: M 7AM-7PM TU 7AM-0PM W-TH 7AM-7PM F 7AM-0PM
 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 301418
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1760194302
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 305424
Board Certified Specialty: No COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1760194302
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 301532
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 1392 E PALOMAR ST STE

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D. دليل مقدمي الخدمات المتخصصين

503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1063046878
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

CHITKARA, PUJA
Provider ID: 262358
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Phone: (619) 623-3000
Fax: (619) 623-3001
After Hours Phone: (619) 623-3000
Provider Gender: Female
NPI: 1871718189
Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Imperial Health Holdings Medical Group-SD

RHEUMATOLOGY

CHWA, JEFFREY
Provider ID: 268780
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Phone: (619) 623-3000
Fax: (619) 623-3001
After Hours Phone: (619) 623-3000
Provider Gender: Male
NPI: 1285989236
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS
Provider ID: 296928
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
333 H ST STE 5000
CHULA VISTA, CA 91910
Phone: (877) 757-8353
Fax: (818) 357-2505

After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1063660165
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CLARK, MELISSA

Provider ID: 296923

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

333 H ST STE 5000
CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 7AM-7PM
M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307884

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

333 H ST STE 5000
CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304607

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Phone: (619) 576-7007

Fax: (619) 567-7775

After Hours Phone: (619)
576-7007

Provider Gender: Male

NPI: 1437470762

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MERCY HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302084

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

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D. دليل مقدمي الخدمات المتخصصين

VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC


KUSNEZOV, NICHOLAS

Provider ID: 303195

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

 Phone: (858) 824-1703

Fax: (858) 455-6473

 After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL
CTR, PARADISE VALLEY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


CMP PENDLETON


CERTIFIED NURSE PRACTITIONER


FREEMAN, WANDA

Provider ID: 298117

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 619 CROUCH ST
CMP PENDLETON, CA
92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

CORONADO


CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301599

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 230 PROSPECT PL STE 210
CORONADO, CA 92118

 Phone: (619) 299-0670

Fax: (858) 429-7929

 After Hours Phone: (619)
299-0670

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين


 Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268655
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 801 ORANGE AVE
CORONADO, CA 92118

 Phone: (619) 437-8154
Fax: (310) 989-3092

 After Hours Phone: (619)
437-8154

Provider Gender: Female
NPI: 1902853344


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: Community Care IPA LLC


SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302087

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 230 PROSPECT PL STE 230
CORONADO, CA 92118


 Phone: (619) 435-7282

Fax: (619) 435-3723

 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302102

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 230 PROSPECT PL STE 230
CORONADO, CA 92118

 Phone: (619) 435-7282

Fax: (619) 435-3723

 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1497751457

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

EL CAJON

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303446

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1625 E MAIN ST STE 201

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D. دليل مقدمي الخدمات المتخصصين

EL CAJON, CA 92021
Phone: (619) 486-6512
Fax: (619) 616-2104
After Hours Phone: (619) 486-6512
Provider Gender: Male
NPI: 1962899823
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN
Provider ID: 290945
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Provider Gender: Male
NPI: 1659745610
Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TU-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 302295
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1164812293
Provider English Spoken: Y
Provider Language(s) Spoken: Persian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MANRIQUEZ, LISETTE
Provider ID: 307102
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1760058911
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

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D. دليل مقدمي الخدمات المتخصصين

PIRTLE, KEYSHONE

Provider ID: 284244

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5442 SYCUAN RD
EL CAJON, CA 92019

Phone: (619) 445-0707

Fax: (619) 445-9764

After Hours Phone: (619)
445-0707

Provider Gender: Male

NPI: 1417567827

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, SHANTRICE

Provider ID: 296007

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1578865549

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-2PM

TU-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO

Provider ID: 308218

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

222 W MADISON AVE
EL CAJON, CA 92020

Phone: (619) 579-5115

Fax: (619) 749-6174

After Hours Phone: (619)
579-5115

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO

Provider ID: 306321

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

222 W MADISON AVE
EL CAJON, CA 92020

Phone: (619) 579-5115

Fax: (619) 749-6174

After Hours Phone: (619)
579-5115

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-4:30PM




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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

GASTROENTEROLOGY








NOVO, MEGAN

Provider ID: 296067
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
 Phone: (619) 266-3332
Fax: (619) 266-6000
 After Hours Phone: (619)
266-3332
Provider Gender: Female
NPI: 1770961971
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,
UCSD MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


HEARING AID DEALER / SUPPLIER





ANDERSON, ELAINE

Provider ID: 268692
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1767 E MAIN ST
EL CAJON, CA 92021
 Phone: (619) 440-6516
Fax: (619) 440-6547
 After Hours Phone: (619)
440-6516
Provider Gender: Female
NPI: 1063558856
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER






DAVIS, KELLE

Provider ID: 268650
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1767 E MAIN ST

EL CAJON, CA 92021
 Phone: (619) 440-6516
Fax: (619) 440-6547
 After Hours Phone: (619)
440-6516
Provider Gender: Female
NPI: 1902853344
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 291282
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS


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D. دليل مقدمي الخدمات المتخصصين

MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 294916

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 294908

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1467871673

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL


CARDIOLOGY

MOHAMEDALI, BURHAN


Provider ID: 309247

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1625 E MAIN ST STE 201
EL CAJON, CA 92021

 Phone: (619) 486-6512


Fax: (619) 486-6470

 After Hours Phone: (619)
486-6512

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL


CARDIOLOGY


SHEREV, DIMITRI

Provider ID: 302988

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1380 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 867-0557

 After Hours Phone: (619)

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D. دليل مقدمي الخدمات المتخصصين

867-0557
Provider Gender: Male
NPI: 1154323996
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SHARP CORONADO
HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 295843

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
☎ Phone: (619) 486-6512
📠 Fax: (619) 616-2104
🕒 After Hours Phone: (619)
486-6512
Provider Gender: Female
NPI: 1811307051
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 309095
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
☎ Phone: (619) 486-6512
📠 Fax: (619) 616-2104
🕒 After Hours Phone: (619)

486-6512
Provider Gender: Female
NPI: 1811307051
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

AOTO, KIM
Provider ID: 268721
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
☎ Phone: (800) 898-2020
📠 Fax: (844) 897-3788
🕒 After Hours Phone: (800)
898-2020
Provider Gender: Female
NPI: 1780935650
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 265073

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 306904

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 231 W MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 425-7755

Fax: (619) 425-2138

🕒 After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

INDA, PRISCILLA

Provider ID: 265073

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 328 HIGHLAND AVE STE 200

EL CAJON, CA 92020

☎ Phone: (619) 930-9404

Fax: (619) 930-9426

🕒 After Hours Phone: (619) 930-9404

Provider Gender: Female

NPI: 1679008379

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

LE, TAYLOR

Provider ID: 304574

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 440-2751

Fax: (360) 462-2746

🕒 After Hours Phone: (619) 440-2751

Provider Gender: Female

NPI: 1396478400

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RAMOS, JACQUELYN

Provider ID: 301106

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 440-2751

Fax: (360) 462-2746

🕒 After Hours Phone: (619) 440-2751

Provider Gender: Female

NPI: 1003515131

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN


Provider ID: 305449

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

ARAIZA, ERNESTINA


Provider ID: 290286

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1568608636

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 290309

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 215 W MADISON AVE
EL CAJON, CA 92020


 Phone: (760) 737-6935

Fax: (760) 741-2782

 After Hours Phone: (760)
737-6935

Provider Gender: Female

NPI: 1548873755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 306785

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 215 W MADISON AVE
EL CAJON, CA 92020


 Phone: (760) 737-6935


Fax: (760) 741-2782

 After Hours Phone: (760)
737-6935

Provider Gender: Female

NPI: 1548873755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Medi-Cal Open Panel: No




Min/Max Age: 0\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 9AM-7PM*
 *Website: N/A*
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP


PSYCHOLOGIST



GUARDADO-SOTO, RAQUEL

Provider ID: 290342
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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

Provider Gender: Female
NPI: 1194999276

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST




WHEELER, KIM

Provider ID: 302144
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020
 *Phone: (619) 662-4100*
Fax: (619) 785-3356
 *After Hours Phone: (619) 662-4100*
Provider Gender: Female
NPI: 1700577434



 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 11\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP



REGISTERED PHYSICAL THERAPIST

CAMPA, PATRICIA




Provider ID: 302398
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 860 JAMACHA RD STE 203
EL CAJON, CA 92019
 *Phone: (619) 573-6373*
Fax: (619) 378-6578
 *After Hours Phone: (619) 573-6373*

Provider Gender: Female
NPI: 1528079357

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST




MORRIS, CHAD

Provider ID: 302403
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 860 JAMACHA RD STE 203
EL CAJON, CA 92019
 *Phone: (619) 573-6373*
Fax: (619) 378-6578

 *After Hours Phone: (619) 573-6373*
Provider Gender: Male
NPI: 1841307063

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP

EL CENTRO

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D. دليل مقدمي الخدمات المتخصصين

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 277248

Board Certified Specialty: No
UCSD MEDICAL GROUP

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287653

Board Certified Specialty: No
UCSD MEDICAL GROUP

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417243239

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

MINOKADEH, ANUSHIRVAN

Provider ID: 277351

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053339093

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL

CARE MEDICINE

RODRIGUEZ-MINETTE,

JESSICA

Provider ID: 277410

Board Certified Specialty: No

UCSD MEDICAL GROUP

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164809950

Provider English Spoken: Y

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Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY
 Provider ID: 308403
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1500 S IMPERIAL AVE
 EL CENTRO, CA 92243
 Phone: (760) 206-4105
 Fax: (760) 610-0523
 After Hours Phone: (760) 206-4105
 Provider Gender: Male
 NPI: 1205949914
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SHARP CORONADO HOSP
 AND HEALTHCARE CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
 Provider ID: 285963
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1415 ROSS AVE
 EL CENTRO, CA 92243
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1326599002
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TABAREZ, NORMA

Provider ID: 272979
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1415 ROSS AVE
 EL CENTRO, CA 92243
 Phone: (866) 803-2262
 After Hours Phone: (866) 803-2262
 Provider Gender: Female
 NPI: 1538535570
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE

BAGBY, JESSICA
 Provider ID: 271137
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1415 ROSS AVE
 EL CENTRO, CA 92243
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1093161473
 Provider English Spoken: Y
 Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE


GUITTARD, JESSE

Provider ID: 239878

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243


 Phone: (760) 339-7100

 After Hours Phone: (760)
339-7100

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE


HERNANDEZ, CRISTINA

Provider ID: 242543

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE


HORNBEAK, KIRSTEN

Provider ID: 240024

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243

 Phone: (760) 339-7100

 After Hours Phone: (760)
339-7100

Provider Gender: Female

NPI: 1205214442

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE

HUTCHISON, HEIDI

Provider ID: 272661

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243

 Phone: (760) 339-7100

Fax: (760) 352-7612




 After Hours Phone: (760)




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D. دليل مقدمي الخدمات المتخصصين







339-7100
Provider Gender: Female
NPI: 1417483587
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SIERRA
VISTA REGIONAL MED CTR,
TWIN CITIES COMMUNITY
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

ICHWAN, DANIEL
Provider ID: 283222
Board Certified Specialty: No
UCSD MEDICAL GROUP
 1415 ROSS AVE
EL CENTRO, CA 92243
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740711589
 Provider English Spoken: Y
Cultural Competency: N







Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

RUDOLF, FRANCES
Provider ID: 240161
Board Certified Specialty: No
UCSD MEDICAL GROUP
 1415 ROSS AVE
EL CENTRO, CA 92243
 Phone: (760) 339-7000
 After Hours Phone: (760)
339-7000
Provider Gender: Female
NPI: 1821487430
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 239824
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
 1415 ROSS AVE
EL CENTRO, CA 92243
 Phone: (800) 826-8273
 After Hours Phone: (800)
826-8273
Provider Gender: Male
NPI: 1124280730
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, Sharp Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 8AM-8PM
M-F 8AM-5PM
SA 8AM-8PM
 Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

AKRAMI, KEVAN
Provider ID: 277342
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225364052
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

SWEENEY, DANIEL
Provider ID: 277369
Board Certified Specialty: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497892954
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

AMANN, CHRISTOPHER
Provider ID: 277245
Board Certified Specialty: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1134326895
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH

NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 277388
Board Certified Specialty: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,

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D. دليل مقدمي الخدمات المتخصصين

SCRIPPS MEMORIAL
HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE CRITICAL CARE MEDICINE

GOWDA, ASHWIN

Provider ID: 277348

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366736092

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE CRITICAL CARE MEDICINE


PAGE, BRADY

Provider ID: 307660

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1528557550

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE CRITICAL CARE MEDICINE


RAMNATH, VENKTESH

Provider ID: 277358

Board Certified Specialty: No
UCSD MEDICAL GROUP

 1415 ROSS AVE
EL CENTRO, CA 92243


 Phone: (760) 339-7202

 After Hours Phone: (760)
339-7202

Provider Gender: Male

NPI: 1215911730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Hindi,
Kannada, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,

EL CENTRO REGIONAL

MEDICAL CENTER, UCSD

MEDICAL CTR, HEALDSBURG
HOSPITAL, Providence

Redwood Memorial Hospital,

Providence Redwood Memorial
Hospital, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

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TRAN, LINH

Provider ID: 277391

Board Certified Specialty: No
UCSD MEDICAL GROUP

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851682728

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

WARDI, GABRIEL

Provider ID: 277341

Board Certified Specialty: No
UCSD MEDICAL GROUP

1415 ROSS AVE

EL CENTRO, CA 92243

Phone: (760) 339-7202

After Hours Phone: (760)
339-7202

Provider Gender: Male

NPI: 1720346083

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, EL CENTRO

REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

TEMECULA VALLEY HOSPITAL

INC, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 244089

Board Certified Specialty: No
UCSD MEDICAL GROUP

1671 W MAIN ST STE B
EL CENTRO, CA 92243

Phone: (855) 543-0555

Fax: (888) 539-8781

After Hours Phone: (855)

543-0555

Provider Gender: Male

NPI: 1093730251

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENCINITAS

CARDIOVASCULAR DISEASE

DURAN, EDWARD

Provider ID: 310052

Board Certified Specialty: No
UCSD MEDICAL GROUP

477 N EL CAMINO REAL
STE D300

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1578903936

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304139

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298659

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1130 2ND ST
ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304133

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

CARDINELL, ANNA

Provider ID: 291412

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306978614

Provider English Spoken: Y

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Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 301447

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


CHAMBERS, KATRINA

Provider ID: 303521


Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 781 GARDEN VIEW CT STE 100

ENCINITAS, CA 92024


 Phone: (760) 183-0441

Fax: (760) 635-5972

 After Hours Phone: (760) 183-0441

Provider Gender: Female

NPI: 1710695143


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 320 SANTA FE DR STE 108
ENCINITAS, CA 92024

 Phone: (760) 436-4558

Fax: (858) 429-7926

 After Hours Phone: (760) 436-4558

Provider Gender: Female

NPI: 1003260894

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER


HEAD, KRISTIN

Provider ID: 268657


Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER


HOOPER, BONNIE

Provider ID: 275253

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

 Phone: (760) 436-2300

Fax: (760) 436-5482

 After Hours Phone: (760)

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D. دليل مقدمي الخدمات المتخصصين

436-2300
Provider Gender: Female
NPI: 1821062878
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282071

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301602

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760)
436-4558

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PAKENHAM, KATE

Provider ID: 296268

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1130 2ND ST
ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578299343

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 8AM-8PM
M-F 8AM-8PM

SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281856

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265487326

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299940

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1902368319

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER

Provider ID: 277111

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 1200 GARDEN VIEW RD
STE 100

ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1568429165

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

PATEL, JANKI

Provider ID: 305301

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

☎ Phone: (760) 354-9697

Fax: (760) 635-5972

☎ After Hours Phone: (760) 354-9697

Provider Gender: Female

NPI: 1548606668

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Gujarati, Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282164

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 1200 GARDEN VIEW RD

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STE 200
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1144486929
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, EARL AND
LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
Providence St Joseph Hospital,
Providence St Jude Medical
Center, ORANGE COAST MEM
MED CTR, FOUNTAIN VALLEY
REGIONAL HOSP AND MED
CTR, FOUNTAIN VALLEY
REGIONAL HOSP AND MED
CTR, CORONA REGIONAL
MED CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

**HOSPICE AND PALLIATIVE
MEDICINE**
RUBENZI, TAMARA
Provider ID: 282127
Board Certified Specialty: No
UCSD MEDICAL GROUP
📄 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N





**HOSPICE AND PALLIATIVE
MEDICINE**
RUBENZI, TAMARA
Provider ID: 245575
Board Certified Specialty: No

UCSD MEDICAL GROUP
📄 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group


**MATERNAL AND FETAL
MEDICINE**
BALLAS, JERASIMOS
Provider ID: 209562
Board Certified Specialty: No
UCSD MEDICAL GROUP
📄 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
☎ Phone: (858) 657-7200
📞 After Hours Phone: (858)




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين





657-7200
Provider Gender: Male
NPI: 1871767384
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, EISENHOWER
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


MATERNAL AND FETAL MEDICINE

HULL, ANDREW
Provider ID: 209483
Board Certified Specialty: No
UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
 Phone: (858) 657-7200
 After Hours Phone: (858)
657-7200
Provider Gender: Male
NPI: 1902862121
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD





MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 208641
Board Certified Specialty: No
UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
 Phone: (858) 657-7200
 After Hours Phone: (858)
657-7200
Provider Gender: Female
NPI: 1770532707
 Provider English Spoken: Y




Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




MATERNAL AND FETAL MEDICINE

MOORE, THOMAS
Provider ID: 208645
Board Certified Specialty: No
UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
 Phone: (858) 657-7200
 After Hours Phone: (858)
657-7200
Provider Gender: Male
NPI: 1184682379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

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D. دليل مقدمي الخدمات المتخصصين






MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group


Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

**MATERNAL AND FETAL
MEDICINE**
RICHARDSON, ALVIE
Provider ID: 277315
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
 Provider Gender: Male
 NPI: 1154305977
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital
 Medi-Cal Open Panel: Yes

WOELKERS, DOUGLAS
Provider ID: 209384
Board Certified Specialty: No
UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
 Phone: (858) 657-7200
 After Hours Phone: (858)
657-7200
 Provider Gender: Male
 NPI: 1013965748
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY

**MATERNAL AND FETAL
MEDICINE**
WOLF, RICHARD
Provider ID: 209254
Board Certified Specialty: No
UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
 Phone: (858) 657-7200
 After Hours Phone: (858)
657-7200
 Provider Gender: Male
 NPI: 1497713846
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 283286
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 633-6120
After Hours Phone: (760) 633-6120
Provider Gender: Female
NPI: 1528454188
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301821
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 633-6120
Fax: (760) 633-7385
After Hours Phone: (760) 633-6120
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 303905
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 633-6120
Fax: (760) 633-7385
After Hours Phone: (760) 633-6120
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


NEUROLOGY

BUI, JONATHAN

Provider ID: 269966

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 477 N EL CAMINO REAL STE 302 ENCINITAS, CA 92024


 Phone: (760) 944-6377


Fax: (760) 944-3927

 After Hours Phone: (760) 944-6377

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


NEUROLOGY

JINDAL, ANUJA


Provider ID: 206264

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 477 N EL CAMINO REAL STE 302 ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


NEUROLOGY


SCHORR, EMILY

Provider ID: 305022

Board Certified Specialty: No
UCSD MEDICAL GROUP


 1200 GARDEN VIEW RD ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: UCSD Medical Group


NEUROLOGY CHILD

KIMMCMANUS, OLIVIA

Provider ID: 206258

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 477 N EL CAMINO REAL BLDG D STE 302 ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)

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D. دليل مقدمي الخدمات المتخصصين

944-5545
Provider Gender: Female
NPI: 1174870067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

SAHAGIAN, MICHELLE
Provider ID: 206073
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA
Provider ID: 282167
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCore, LAURA
Provider ID: 291325
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 293447
Board Certified Specialty: No
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293448

Board Certified Specialty: No
UCSD MEDICAL GROUP

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291336

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 208682

Board Certified Specialty: No
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

Phone: (858) 657-7200

After Hours Phone: (858)
657-7200

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

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D. دليل مقدمي الخدمات المتخصصين

MACKAY, GILLIAN

Provider ID: 303061

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205617

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (760) 944-3927

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267315

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1104237353

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297012

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (760) 944-3927

☎ After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1699216010

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205507

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

☎ Phone: (760) 944-5545

Fax: (760) 944-3927

☎ After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1861648602

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216413

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 477 N EL CAMINO REAL BLD D STE 302

ENCINITAS, CA 92024

☎ Phone: (760) 944-5545

☎ After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1497792220

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205886

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

☎ Phone: (760) 944-5545

Fax: (760) 944-3927

☎ After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1235287947

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


OPTOMETRIST

AOTO, KIM

Provider ID: 296797

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024


 Phone: (760) 943-7141


Fax: (760) 943-0371

 After Hours Phone: (760)
943-7141

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9AM-5PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5PM

F 8:30AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OTOLARYNGOLOGY


BLISS, MORGAN

Provider ID: 206085

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 477 N EL CAMINO REAL
STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

OTOLARYNGOLOGY


FRIESEN, TZYYNONG


Provider ID: 244900

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1952740177


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206112

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 477 N EL CAMINO REAL
STE D302

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D. دليل مقدمي الخدمات المتخصصين

ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
Fax: (760) 944-3927
🕒 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1124230909
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 297035
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
Fax: (760) 944-3927
🕒 After Hours Phone: (760)

944-5545
Provider Gender: Male
NPI: 1508250747
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER
Provider ID: 205696
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
☎ Phone: (858) 966-4900
Fax: (760) 944-3927
🕒 After Hours Phone: (858) 966-4900
Provider Gender: Male
NPI: 1609801299
☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: French, German, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 205688
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
Fax: (760) 944-3927
🕒 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1023329885
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

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DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239115

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206299

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER


Provider ID: 301641

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024


 Phone: (760) 944-5545


Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

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GASTROENTEROLOGY

YOUNG, JOCELYN

Provider ID: 294676

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1306227491

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA

Provider ID: 243043

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1871752451

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294642

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246395

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

After Hours Phone: (760)
944-5545

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1821242199
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON
Provider ID: 256227
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 477 N EL CAMINO REAL
STE C100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1447661657
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287134
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861624181
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 293443
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1386791028
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 302454
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 477 N EL CAMINO REAL

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D. دليل مقدمي الخدمات المتخصصين

STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
☎ Fax: (760) 944-5545
🕒 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1205381845
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PHYSICIANS ASSISTANT

SUTTON, BRIAN
Provider ID: 272241
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
☎ Phone: (760) 598-1776
☎ Fax: (760) 598-5744
🕒 After Hours Phone: (760)

598-1776
Provider Gender: Male
NPI: 1629174727
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

VANETSKY, GARY
Provider ID: 269152
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
☎ Phone: (760) 436-2300
☎ Fax: (760) 436-5482
🕒 After Hours Phone: (760) 436-2300
Provider Gender: Male
NPI: 1417034489
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

PODIATRIST

DUSTIN, ADAM
Provider ID: 275800
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 326 ENCINITAS BLVD STE
100
ENCINITAS, CA 92024
☎ Phone: (760) 436-5533
☎ Fax: (760) 436-0611
🕒 After Hours Phone: (760) 436-5533
Provider Gender: Male
NPI: 1043389026
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291423

Board Certified Specialty: No
UCSD MEDICAL GROUP

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278552

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282143

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201730

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (858) 657-8860

After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes	Min/Max Age: 0\19	Min/Max Age: 0\19
Min/Max Age: 0\None	American Sign Language (ASL): N	American Sign Language (ASL): N
American Sign Language (ASL): N	♿ Accessibility: CONTACT PROVIDER	♿ Accessibility: CONTACT PROVIDER
♿ Accessibility: CONTACT PROVIDER	🕒 Hours: M-F 8AM-5PM	🕒 Hours: M-F 8AM-5PM
🕒 Hours: M-F 8AM-5PM	🌐 Website: N/A	🌐 Website: N/A
🌐 Website: N/A	IPA: Rady Childrens Health Network	IPA: Rady Childrens Health Network
IPA: UCSD Medical Group		

SURGERY PEDIATRIC	SURGERY PEDIATRIC	SURGERY PLASTIC
FAIRBANKS, TIMOTHY	KLING, KAREN	REID, CHRISTOPHER
Provider ID: 205497	Provider ID: 206128	Provider ID: 238130
Board Certified Specialty: No	Board Certified Specialty: No	Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK	RADY CHILDRENS HEALTH NETWORK	UCSD MEDICAL GROUP
📍 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024	📍 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024	📍 1200 GARDEN VIEW RD ENCINITAS, CA 92024
☎ Phone: (760) 944-5545	☎ Phone: (760) 944-5545	☎ Phone: (800) 926-8273
📠 Fax: (760) 944-3927	📠 Fax: (760) 944-3927	📞 After Hours Phone: (800) 926-8273
📞 After Hours Phone: (760) 944-5545	📞 After Hours Phone: (760) 944-5545	Provider Gender: Male
Provider Gender: Male	Provider Gender: Female	NPI: 1982964276
NPI: 1407010556	NPI: 1982775144	🗣 Provider English Spoken: Y
🗣 Provider English Spoken: Y	🗣 Provider English Spoken: Y	Cultural Competency: N
Cultural Competency: N	Cultural Competency: N	Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND	Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL	Medi-Cal Open Panel: Yes
Medi-Cal Open Panel: Yes	Medi-Cal Open Panel: Yes	Min/Max Age: 0\None
		American Sign Language (ASL): N
		♿ Accessibility: CONTACT PROVIDER
		🕒 Hours: M-F 8AM-5PM
		🌐 Website: N/A
		IPA: Rady Childrens Health

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Network, UCSD Medical Group

ESCONDIDO

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308401

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

637 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308112

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

637 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300090

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1955 CITRACADO PKWY
STE 203

ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299881

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY
STE 203

ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

ROBINSON, COLE

Provider ID: 300171

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

160 N DATE ST
ESCONDIDO, CA 92025

Phone: (888) 873-6220

Fax: (888) 873-6220

After Hours Phone: (888)
873-6220

Provider Gender: Male

NPI: 1871799528

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-4PM
SA 7AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309268

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Phone: (760) 294-0480

Fax: (760) 294-0481

After Hours Phone: (760)
294-0480

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 277866

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO






Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: Rady Childrens Health Network</p>	<p>PRACTITIONER</p> <p>KESHAVARZI, SARA</p> <p>Provider ID: 305938</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 488 E VALLEY PKWY STE 411</p> <p>ESCONDIDO, CA 92025</p> <p> Phone: (760) 466-9800</p> <p>Fax: (360) 462-2741</p>	<p>Fax: (360) 462-2741</p> <p> After Hours Phone: (760) 466-9800</p> <p>Provider Gender: Female</p> <p>NPI: 1457996126</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL):</p>
<p>CERTIFIED NURSE PRACTITIONER</p>	<p> After Hours Phone: (760) 466-9800</p> <p>Provider Gender: Female</p> <p>NPI: 1457996126</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL):</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>
<p>JANNESARI, ROYA</p> <p>Provider ID: 302339</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 625 CITRACADO PKWY STE 108</p> <p>ESCONDIDO, CA 92025</p> <p> Phone: (760) 743-1431</p> <p>Fax: (760) 743-6455</p> <p> After Hours Phone: (760) 743-1431</p> <p>Provider Gender: Female</p> <p>NPI: 1063585099</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Farsi, Persian</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL):</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>WALDRUP, LARHONDA</p> <p>Provider ID: 299259</p> <p>Board Certified Specialty: No</p> <p>RADY CHILDRENS HEALTH NETWORK</p> <p> 2185 CITRACADO PKWY</p> <p>ESCONDIDO, CA 92029</p> <p> Phone: (442) 281-3193</p> <p>Fax: (442) 281-3197</p> <p> After Hours Phone: (442) 281-3193</p> <p>Provider Gender: Female</p> <p>NPI: 1831627181</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY</p>
<p>CERTIFIED NURSE PRACTITIONER</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>KESHAVARZI, SARA</p> <p>Provider ID: 309748</p> <p>Board Certified Specialty: No</p> <p>COMMUNITY CARE IPA LLC</p> <p> 488 E VALLEY PKWY STE 411</p> <p>ESCONDIDO, CA 92025</p> <p> Phone: (760) 466-9800</p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>KESHAVARZI, SARA</p> <p>Provider ID: 309748</p> <p>Board Certified Specialty: No</p> <p>COMMUNITY CARE IPA LLC</p> <p> 488 E VALLEY PKWY STE 411</p> <p>ESCONDIDO, CA 92025</p> <p> Phone: (760) 466-9800</p>

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CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


CERTIFIED REGISTERED NURSE ANESTHETIST

SEILNACHT-BERNARD, KAREN

Provider ID: 269203

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 488 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (877) 217-8505

Fax: (760) 735-6296

 After Hours Phone: (877) 217-8505

Provider Gender: Female

NPI: 1861562498


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

EMERGENCY MEDICINE


PHAM, LILY

Provider ID: 304936

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029


 Phone: (760) 739-1543


Fax: (760) 294-9274

 After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network

ENDOCRINOLOGY

METABOLISM DIABETES


REDDY, NAVYA

Provider ID: 302350


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

 Phone: (760) 743-1431

Fax: (760) 743-6455

 After Hours Phone: (760) 743-1431

Provider Gender: Female

NPI: 1083069611


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 306033

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (760) 466-1373

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1285256073

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 305691

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 690-2800

Fax: (949) 404-6908

☎ After Hours Phone: (760) 690-2800

Provider Gender: Male

NPI: 1942406533

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Community Care IPA LLC

GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 269145

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 690-2800

Fax: (760) 690-2801

☎ After Hours Phone: (760) 690-2800

Provider Gender: Male

NPI: 1942406533

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268690

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 330 W FELICITA AVE STE
A4

ESCONDIDO, CA 92025

☎ Phone: (760) 489-1323

Fax: (760) 489-0975

☎ After Hours Phone: (760) 489-1323

Provider Gender: Female

NPI: 1063558856

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 296830

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

COMMUNITY CARE IPA LLC

2130 CITRACADO
PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (760) 743-8005
After Hours Phone: (760)
743-4789
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

MALEK, MIKHAIL

Provider ID: 296831
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2130 CITRACADO
PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760)
743-0546

Provider Gender: Male

NPI: 1467455212
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED

Provider ID: 296843
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
2130 CITRACADO
PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi

Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT,
Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED

Provider ID: 296842
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2130 CITRACADO
PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 309248

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025


 Phone: (760) 294-0480


Fax: (760) 294-0481

 After Hours Phone: (760)
294-0480

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY


SAWHNEY, NAVINDER

Provider ID: 304784

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2130 CITRACADO
PKWY STE 320

ESCONDIDO, CA 92029

 Phone: (858) 485-0130

Fax: (858) 485-9424

 After Hours Phone: (858)
485-0130

Provider Gender: Male

NPI: 1619174133

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN

HOSPITAL, UCSD MEDICAL

CTR, SHARP MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 309097

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

 Phone: (760) 294-0480

Fax: (619) 616-2104

 After Hours Phone: (760)
294-0480

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 15\99

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295845

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Phone: (760) 294-0480
Fax: (619) 616-2104
After Hours Phone: (760) 294-0480
Provider Gender: Female
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296996
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

MATERNAL AND FETAL MEDICINE





REIMERS, REBECCA
Provider ID: 294655
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL
Provider ID: 283707
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
NPI: 1003028416

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network




NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 206163
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)

281-2850
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE




Provider ID: 206137
Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850

Provider Gender: Female
NPI: 1457433799

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 283801

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-3193

Fax: (442) 281-3197

After Hours Phone: (442)
281-3193

Provider Gender: Female

NPI: 1164572632

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEPHROLOGY

AL-DAHMAN, ZAID

Provider ID: 297898

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

631 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)
294-1660

Provider Gender: Male

NPI: 1740716828

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

GOLD, JEFFREY

Provider ID: 277870

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

JINDAL, ANUJA

Provider ID: 277838

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (760) 294-9260

Provider Gender: Female

NPI: 1194046581

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY

KIMMCMANUS, OLIVIA

Provider ID: 277873

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

☎ Phone: (858) 966-5819

Fax: (760) 294-9274

☎ After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1174870067

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE

COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 277891

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9260

Fax: (760) 294-9274

☎ After Hours Phone: (760) 294-9260

Provider Gender: Male

NPI: 1487819546

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206076

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025

☎ Phone: (760) 294-9260

Fax: (760) 294-9274

☎ After Hours Phone: (760) 294-9260

Provider Gender: Female

NPI: 1275604035

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL): N
Website: N/A
IPA: Community Care IPA LLC,
Rady Childrens Health
Network

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 277041

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)
658-6101

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-4:30PM
F 9AM-2PM

Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 285629

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)
658-6101

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-4:30PM
F 9AM-2PM

Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 285628

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029

Phone: (760) 233-1896

Fax: (760) 233-1899

After Hours Phone: (760)
233-1896

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-4:30PM
F 9AM-2PM

Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 277040

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

1955 CITRACADO PKWY

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STE 302
ESCONDIDO, CA 92029
☎ Phone: (760) 233-1896
☎ Fax: (760) 233-1899
📞 After Hours Phone: (760) 233-1896
Provider Gender: Male
NPI: 1215170717
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH 9AM-4:30PM F 9AM-2PM
🌐 Website: N/A
IPA: Community Care IPA LLC, Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 285518
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 2125 CITRACADO PKWY STE 210
ESCONDIDO, CA 92029
☎ Phone: (760) 739-2921
☎ Fax: (760) 739-3162
📞 After Hours Phone: (760) 739-2921

Provider Gender: Female
NPI: 1396904876
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 277883
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 755-7600
☎ Fax: (760) 755-7699
📞 After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1871664631
☑ Provider English Spoken: Y


☑ Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 277877
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 755-7600
☎ Fax: (760) 755-7699
📞 After Hours Phone: (760)




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D. دليل مقدمي الخدمات المتخصصين





755-7600
 Provider Gender: Female
 NPI: 1104237353
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, RADY CHILDRENS
 HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network




OPHTHALMOLOGY

HENNEIN, LAUREN
 Provider ID: 297014
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY
 STE 200
 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 NPI: 1699216010
 Provider English Spoken: Y





Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

OPHTHALMOLOGY

MOLL, ANGELA
 Provider ID: 205895
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 206
 ESCONDIDO, CA 92025
 Phone: (760) 755-7600
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 NPI: 1861648602
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, GROSSMONT
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL, UCSF BENIOFF




CHILDREN'S HOSPITAL
 OAKLAND, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

OPHTHALMOLOGY

MOLL, ANGELA
 Provider ID: 277824
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY
 STE 200
 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 NPI: 1861648602
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, GROSSMONT
 HOSPITAL, SHARP MEMORIAL






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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
Network

OPHTHALMOLOGY





MOVAGHAR, MANSOOR




Provider ID: 277833
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
 Provider Gender: Male
 NPI: 1497792220
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
Network, UCSD Medical Group

OPHTHALMOLOGY








OHALLORAN, HENRY

Provider ID: 277869
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
 Provider Gender: Male
 NPI: 1235287947
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305307
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
 Phone: (800) 765-2737
 Fax: (619) 291-6577
 After Hours Phone: (800)
765-2737
 Provider Gender: Female
 NPI: 1932605649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU 8:30AM-4PM
W-F 8:30AM-1PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,

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D. دليل مقدمي الخدمات المتخصصين

UCSD Medical Group

OPTOMETRIST

AOTO, KIM

Provider ID: 268719

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPTOMETRIST

AOTO, KIM

Provider ID: 296796

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

700 W EL NORTE PKWY

STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 9AM-5PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5PM

F 8:30AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 307410

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1118 W VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 307411

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1118 W VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

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IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 277537

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 277853

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 277860

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206110

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1124230909

Provider English Spoken: Y
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY


PATEL, VIJAY

Provider ID: 297038

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY


DAVIS, CHRISTOPHER

Provider ID: 277811

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY


HALEY, JESSICA

Provider ID: 205689

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



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 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


HALEY, JESSICA

Provider ID: 277867
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 294-9260
 Fax: (760) 294-9274

 After Hours Phone: (760) 294-9260


Provider Gender: Female
 NPI: 1023329885

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


NARAYAN, HARI

Provider ID: 277846
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 294-9260
 Fax: (760) 294-9274

 After Hours Phone: (760) 294-9260


Provider Gender: Male
 NPI: 1376705707

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY


SILVASEPULVEDA, JOSE

Provider ID: 206298
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK


 625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025

 Phone: (760) 294-9260
 Fax: (760) 294-9274

 After Hours Phone: (760) 294-9260


Provider Gender: Male
 NPI: 1417222472

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A



IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA

Provider ID: 303783
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 739-1543
 Fax: (760) 294-9274

 After Hours Phone: (760) 739-1543

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1851927883
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 277851
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
☎ Phone: (760) 739-1543
Fax: (760) 294-9274
🕒 After Hours Phone: (760)
739-1543

Provider Gender: Female
NPI: 1316162324
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297178
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
☎ Phone: (760) 739-1543
Fax: (760) 294-9274
🕒 After Hours Phone: (760)
739-1543
Provider Gender: Male
NPI: 1942223664
☐ Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network


PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295670
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
☎ Phone: (760) 739-1543
Fax: (760) 294-9274
🕒 After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1134681265
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE




PARKER, SHERINE




Provider ID: 277872
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 Phone: (760) 739-1543
Fax: (760) 294-9274
 After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1477626513
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP

AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE



QUINONES-PEREZ, BIANCA

Provider ID: 277810
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 Phone: (760) 739-1543
Fax: (760) 294-9274
 After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1124360565
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302802
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 Phone: (760) 739-1543
Fax: (760) 294-9274
 After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1407299787
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,

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D. دليل مقدمي الخدمات المتخصصين

SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205812
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025
☎ Phone: (760) 739-1543
Fax: (760) 294-9274
🕒 After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1083840920
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE



















VAIDYA, KAMALA
Provider ID: 289412
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
☎ Phone: (760) 739-1543
Fax: (760) 294-9274
🕒 After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1083840920
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301643
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
☎ Phone: (760) 294-9260
Fax: (760) 294-9274
🕒 After Hours Phone: (760)
294-9260
Provider Gender: Male
NPI: 1912369273
📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><i>Network</i></p> <hr/> <p style="text-align: center;"><u>PEDIATRICS</u></p> <hr/> <p>FIGUEROA RODRIGUEZ, BRENDA <i>Provider ID: 306823</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p>	<p><i>IHP OF SOUTHERN CAL-PHP</i>  1955 CITRACADO PKWY STE 203 ESCONDIDO, CA 92029  <i>Phone: (760) 738-5533</i> <i>Fax: (909) 204-7863</i>  <i>After Hours Phone: (760) 738-5533</i> <i>Provider Gender: Male</i> <i>NPI: 1407052459</i></p>
<hr/> <p style="text-align: center;"><u>PEDIATRICS</u></p> <hr/> <p>CAMERON, MELISSA <i>Provider ID: 205966</i> <i>Board Certified Specialty: No</i> <i>RADY CHILDRENS HEALTH NETWORK</i>  2185 CITRACADO PKWY ESCONDIDO, CA 92029  <i>Phone: (442) 281-2850</i> <i>Fax: (442) 281-2999</i>  <i>After Hours Phone: (442) 281-2850</i> <i>Provider Gender: Female</i> <i>NPI: 1902983752</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL):</i></p>	<p> 425 N DATE ST ESCONDIDO, CA 92025  <i>Phone: (833) 867-4642</i> <i>Fax: (858) 633-4693</i>  <i>After Hours Phone: (833) 867-4642</i> <i>Provider Gender: Female</i> <i>NPI: 1134205214</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: Sharp Grossmont Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL):</i></p>	<p><i>Center</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 18\None</i> <i>American Sign Language (ASL):</i></p> <p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health</i></p>	<hr/> <p style="text-align: center;"><u>PHYSICAL MEDICINE / REHABILITATION</u></p> <hr/> <p>RICHARDSON, HENRY <i>Provider ID: 295277</i> <i>Board Certified Specialty: No</i></p>	<hr/> <p style="text-align: center;"><u>PHYSICAL MEDICINE / REHABILITATION</u></p> <hr/> <p>RYAN, KYLE <i>Provider ID: 275660</i> <i>Board Certified Specialty: No</i> <i>RADY CHILDRENS HEALTH NETWORK</i>  625 CITRACADO PKWY ESCONDIDO, CA 92025  <i>Phone: (760) 294-9260</i></p>

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D. دليل مقدمي الخدمات المتخصصين

Fax: (760) 294-9274
☎ After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1447645742
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA
Provider ID: 276716
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 1955 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 743-4789
Fax: (858) 673-5187
☎ After Hours Phone: (760) 743-4789
Provider Gender: Female
NPI: 1215584628
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

CORVINI, NICOLAS
Provider ID: 296999
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 425 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8300
Fax: (858) 633-4698
☎ After Hours Phone: (760) 520-8300
Provider Gender: Male
NPI: 1194242461

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER
Provider ID: 301993
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
☎ Phone: (760) 743-1431
Fax: (760) 743-6455
☎ After Hours Phone: (760) 743-1431
Provider Gender: Male
NPI: 1982365490
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

GANGJI, SHAZMIN
Provider ID: 298110
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
Fax: (360) 462-2745
☎ After Hours Phone: (760) 520-8100
Provider Gender: Female
NPI: 1346763638
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL): RADY CHILDRENS HEALTH NETWORK

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


Provider ID: 302456


Board Certified Specialty: No

2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029

 Phone: (760) 294-9260


 Phone: (760) 294-9260

 Fax: (760) 294-9274

 After Hours Phone: (760) 294-9260

Provider Gender: Female

NPI: 1205381845


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM


 Website: N/A

IPA: Rady Childrens Health Network

 625 CITRACADO PKWY STE 108 ESCONDIDO, CA 92025

 Phone: (760) 743-1431

 Fax: (760) 743-6455

 After Hours Phone: (760) 743-1431

Provider Gender: Male


NPI: 1386893089


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PHYSICIANS ASSISTANT


NIAKAMAL, EVAN

Provider ID: 291250

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8340

Provider Gender: Male

NPI: 1639796873


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

PHYSICIANS ASSISTANT

WALSH, JOHN

Provider ID: 301971


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP


PHYSICIANS ASSISTANT


WRIGHT, DEREK

Provider ID: 302390

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1955 CITRACADO PKWY ESCONDIDO, CA 92029

 Phone: (760) 738-5533

 Fax: (909) 204-7863

 After Hours Phone: (760) 738-5533

Provider Gender: Male

NPI: 1629674858

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PODIATRIST

ALGHURAIBI, OHOUD

Provider ID: 295998

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1669842357

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PODIATRIST

READ, TRENTON

Provider ID: 300882

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Phone: (760) 480-1189

Fax: (858) 485-1515

After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

PODIATRIST

READ, TRENTON

Provider ID: 296654

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Phone: (760) 480-1189

Fax: (858) 485-1515

After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

PSYCHOLOGIST

CARLTON-PENN, CORNELIA

Provider ID: 290406

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Provider Gender: Female

NPI: 1891720611

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N


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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

ESTRADA PATINO, ANGELA

Provider ID: 296605

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8100

Fax: (360) 462-2745

 After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1629339015

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8340

Provider Gender: Male

NPI: 1821013228

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290891

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

Provider Gender: Female

NPI: 1932308442

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290779

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 426 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 690-5900

Fax: (858) 633-4693

 After Hours Phone: (760)
690-5900

Provider Gender: Female

NPI: 1932308442

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

VALLEZ-BARLAM, ANDREA

Provider ID: 290630

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Provider Gender: Female

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290631

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (858) 633-4693

After Hours Phone: (760)
466-9800

Provider Gender: Female

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

VAQUERO, JUANA

Provider ID: 290762

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Provider Gender: Female

NPI: 1023459708

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290634

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Provider Gender: Female

NPI: 1639362494

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PULMONARY DISEASES

QUAN, MICHELE GRACE

Provider ID: 287097








Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2125 CITRACADO PKWY
STE 230

ESCONDIDO, CA 92029







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D. دليل مقدمي الخدمات المتخصصين

 Phone: (760) 489-1458
 Fax: (760) 489-1246
 After Hours Phone: (760) 489-1458
 Provider Gender: Female
 NPI: 1629462882
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: REDLANDS COMMUNITY HOSP
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI




Provider ID: 221090
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY STE 110
 ESCONDIDO, CA 92029
 Phone: (760) 739-3371
 Fax: (760) 739-3779
 After Hours Phone: (760) 739-3371
 Provider Gender: Female
 NPI: 1053348920
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL,
 GROSSMONT HOSPITAL,
 PALOMAR MEDICAL CENTER,
 Sharp Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19\100
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

RADIATION ONCOLOGY








VOLPP, PAUL

Provider ID: 221103
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY STE 110
 ESCONDIDO, CA 92029
 Phone: (760) 739-3371
 Fax: (760) 739-3779
 After Hours Phone: (760) 739-3371
 Provider Gender: Male
 NPI: 1225186232
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
 GROSSMONT HOSPITAL,
 PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19\100
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283206
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 701 E GRAND AVE STE 200
 ESCONDIDO, CA 92025
 Phone: (619) 230-0400
 Fax: (858) 429-7936
 After Hours Phone: (619) 230-0400
 Provider Gender: Male
 NPI: 1427456151
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PIONEERS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM




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D. دليل مقدمي الخدمات المتخصصين


 Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST


MCGEE, JACQUELINE

Provider ID: 252473
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
 Phone: (760) 233-9655
Fax: (760) 233-9648
 After Hours Phone: (760)
233-9655

Provider Gender: Female
NPI: 1194217133

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 8\None
American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-6PM


 Website: N/A


IPA: Community Care IPA LLC

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS


Provider ID: 296931
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025

 Phone: (877) 757-8353
Fax: (818) 357-2505


 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

CLARK, MELISSA



Provider ID: 296924
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025

 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1760546428

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,


Farsi, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7AM-7PM
M-F 7AM-7PM


 Website: N/A


IPA: IHP of Southern Cal-PHP


SPEECH PATHOLOGIST

DURNAN, CASSANDRA


Provider ID: 307881
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025

 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304606

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Phone: (760) 884-4500

Fax: (619) 483-3997

After Hours Phone: (760)
884-4500

Provider Gender: Male

NPI: 1437470762

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

GROVE, JAY

Provider ID: 245226

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (760) 300-3647

Fax: (760) 482-1316

After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

SURGERY NEUROLOGICAL

HATEFI, DUSTIN

Provider ID: 310032

Board Certified Specialty: No
UCSD MEDICAL GROUP

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 277831

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

Phone: (760) 480-8770

Fax: (760) 480-8811


After Hours Phone: (760)
480-8770

Provider Gender: Male

NPI: 1013048412

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D. دليل مقدمي الخدمات المتخصصين


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


SURGERY ORTHOPEDIC

KNUTSON, THOMAS


Provider ID: 296851

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2130 CITRACADO
PKWYSTE 200
ESCONDIDO, CA 92029

 Phone: (760) 743-4789

Fax: (760) 743-4779

 After Hours Phone: (760)
743-4789

Provider Gender: Male

NPI: 1962409938

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC


SURGERY ORTHOPEDIC

SHARP, LORRA

Provider ID: 304761

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2130 CITRACADO
PKWYSTE 220
ESCONDIDO, CA 92029


 Phone: (760) 743-0546


Fax: (760) 317-9769

 After Hours Phone: (760)
743-0546

Provider Gender: Female

NPI: 1689689176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: POMONA


VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC


SURGERY ORTHOPEDIC

SHARP, LORRA

Provider ID: 296808

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029


 Phone: (760) 743-4789

Fax: (858) 385-1690

 After Hours Phone: (760)
743-4789

Provider Gender: Female

NPI: 1689689176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: POMONA
VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206130

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 625 CITRACADO PKWY STE
206

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D. دليل مقدمي الخدمات المتخصصين

ESCONDIDO, CA 92025
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1982775144
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

FALLBROOK

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN
Provider ID: 290943
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1309 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 690-5900
Fax: (760) 731-1063
After Hours Phone: (760) 690-5900
Provider Gender: Male
NPI: 1659745610
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TU-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GUIDI, CASEY
Provider ID: 296010
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4730
Fax: (760) 457-4700
After Hours Phone: (760) 451-4730
Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 298086
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 299775
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760)
723-6200
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

STOJANOVSKA, JOVANA

Provider ID: 301367
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760)
451-4720
Provider Gender: Female
NPI: 1215638499
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 302118
Board Certified Specialty: No
RADY CHILDRENS HEALTH

CERTIFIED NURSE PRACTITIONER

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760)
723-6200
Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 299407
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760)
723-6200
Provider Gender: Male
NPI: 1851747166

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 5\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network


CHIROPRACTOR

FARSHLER, ANTHONY

Provider ID: 290306

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1841627759


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


CHIROPRACTOR

HALVORSON, PAULA

Provider ID: 298338

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Female

NPI: 1275542193


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: TU 8AM-5PM
TH-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

CHRISTIE, PATRICIA

Provider ID: 299526

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 457-4700

 After Hours Phone: (760)

451-4720

Provider Gender: Female

NPI: 1881625531


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP


OPTOMETRIST

BULLUM, ANTHONY

Provider ID: 290329

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Male

NPI: 1992773956


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

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IPA: IHP of Southern Cal-PHP

PEDIATRICS

ROBINSON, DAISY

Provider ID: 298311

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1659389740

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

SMITH, LINDA

Provider ID: 308731

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 451-4700

After Hours Phone: (760)
451-4720

Provider Gender: Female

NPI: 1881665800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

HEMET

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272953

Board Certified Specialty: No
UCSD MEDICAL GROUP

3853 W STETSON AVE STE
200

HEMET, CA 92545

Phone: (951) 225-6802

After Hours Phone: (951)
225-6802

Provider Gender: Female

NPI: 1841771664

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER

BORRAJERO, OBEL

Provider ID: 303242

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA
91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1093280588

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, STEPHANIE

Provider ID: 301310

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1174223655


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296845

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP



 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER


THYGERSEN, ALAYSA

Provider ID: 297909

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE

IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1760107767


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP



 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1124288873

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


INTERNAL MEDICINE


RYAN, DANA

Provider ID: 298099

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1780609990

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-8PM
TU-W 8:30AM-5PM

TH 8:30AM-8PM

F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST


CHENG, BRANDON

Provider ID: 304530

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932


 Phone: (619) 332-4200

Fax: (613) 332-4220

 After Hours Phone: (619)
332-4200

Provider Gender: Male

NPI: 1336894724

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-5PM

SA 8AM-1PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST


JIMENEZ, ANDREA

Provider ID: 301973

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932


 Phone: (619) 482-3000

Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299890

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

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D. دليل مقدمي الخدمات المتخصصين

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287101

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-6PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305015

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305016

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-4PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301995

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286783

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301109

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 7AM-7PM
TU 7AM-0PM
W-TH 7AM-7PM
F 7AM-0PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301429

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298365

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301531

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126
IMPERIAL BEACH, CA

91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

LA JOLLA

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY

Provider ID: 246312

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346515442

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242302

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1811366644

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

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Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300067
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1265938724

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

BRUNO, KELLY

Provider ID: 238904
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1891130993

Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310045
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1205966264

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239003
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1710373642

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269503

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609353465

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280469

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831166560

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SADDLEBACK

MEMORIAL MED CTR, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

HOSALKAR, HETAL

Provider ID: 243370

Board Certified Specialty: No
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861556821

Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi, Gujarati,
Hindi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241736

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239608

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720473044

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

NGUYEN, QUOC SY

Provider ID: 242189

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871911644

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

OKAMOTO, VINCENT

Provider ID: 245952

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952338709

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, ALVARADO

HOSPITAL LLC, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY


OSWALD, JESSICA

Provider ID: 239601

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY


SHAW, SUSANNA

Provider ID: 255317

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243295

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1447516414

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286570

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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D. دليل مقدمي الخدمات المتخصصين

MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY


TRIVEDI, SURAJ

Provider ID: 246750

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699057885

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271683

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003261595

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283690

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871912493

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: UCSD Medical Group

ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284578

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801258264

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

WANG, MICHELLE

Provider ID: 286139

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659802965

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272805

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1629463104

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

YOUNAN, LAWRENCE

Provider ID: 240871

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922432475

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY CRITICAL CARE MEDICINE


KRAUSE, MARTIN

Provider ID: 280540

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417243239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A
IPA: UCSD Medical Group



ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243554

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700296514

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


CARDIOVASCULAR DISEASE

KEEN, WILLIAM

Provider ID: 291303

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1962561571

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


CARDIOVASCULAR DISEASE


MIZZELL, ANNA

Provider ID: 214021

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
FL 1

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851561021

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS

Provider ID: 224864

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1023373040

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 300000

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811382815

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304140

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304136

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: N/A
IPA: UCSD Medical Group


CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304141

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304135

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304134

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304130

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER

AGYEMANG, ALBERTA

Provider ID: 265131

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (858) 657-8000

Fax: (858) 657-8387

 After Hours Phone: (858)
657-8000

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


AGYEMANG, ALBERTA

Provider ID: 265130

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BOUTELLE, AMY


Provider ID: 243485


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609117704


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER


BRADY, KATELYN

Provider ID: 209017

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952797540

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243717

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851749253

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER

Provider ID: 241030

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA

Provider ID: 299931

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA

Provider ID: 299932

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1770558967

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279834

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CZYPULL, MONICA

Provider ID: 284662

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

☎ Phone: (858) 554-1212

Fax: (858) 795-1195

📞 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1831784842

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 238922

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 657-7600

📞 After Hours Phone: (858)
657-7600

Provider Gender: Female

NPI: 1679850671

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 253691

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR

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D. دليل مقدمي الخدمات المتخصصين

STE 100
LA JOLLA, CA 92037
☎ Phone: (858) 249-6800
Fax: (858) 657-6420
📞 After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1679850671
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 300052
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female

NPI: 1528632742
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 245579
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346670718
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 245580
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346670718
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286376

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (858) 822-6277

Fax: (858) 228-1731

After Hours Phone: (858)
822-6277

Provider Gender: Female

NPI: 1396085098

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GARTH, MELISSA

Provider ID: 268992

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GARTH, MELISSA

Provider ID: 268991

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GIOVANNETTI, ERIN

Provider ID: 276002

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1013317767

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299469

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE


Provider ID: 299470

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299464

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE


Provider ID: 299465

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None




American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HANNA, LINDSAY
 Provider ID: 284967
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273



Provider Gender: Female
 NPI: 1699257907
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER




HARKNESS, RUMIKO
 Provider ID: 208840
 Board Certified Specialty: No



UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
 STE 200
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273




Provider Gender: Female
 NPI: 1487785093
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Japanese
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

IYER, VICTORIA
 Provider ID: 265624
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 STE 2B
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1871738864

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


JONES, CHRISTA
 Provider ID: 275564
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (800) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1396371431
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


KORMANIK, PATRICIA

Provider ID: 282070

Board Certified Specialty: No UCSD MEDICAL GROUP

 **3855 HEALTH SCIENCES DR**

LA JOLLA, CA 92093

 **Phone: (800) 926-8273**

Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Female

NPI: 1093895047

 **Provider English Spoken: Y Cultural Competency: N**

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


LANE, KIMBERLY

Provider ID: 301604

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 **9850 GENESEE AVE STE 440**

LA JOLLA, CA 92037

 **Phone: (858) 453-5944**

Fax: (858) 429-7925

 **After Hours Phone: (858) 453-5944**

Provider Gender: Female

NPI: 1457670119

 **Provider English Spoken: Y Cultural Competency: N**


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER


MATTHESS, JANETTE

Provider ID: 287644

Board Certified Specialty: No UCSD MEDICAL GROUP

 **8910 VILLA LA JOLLA DR STE 100**

LA JOLLA, CA 92037

 **Phone: (800) 926-8273**

Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Female

NPI: 1457694549

 **Provider English Spoken: Y Cultural Competency: N**

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER

MATTHESS, JANETTE

Provider ID: 287645

Board Certified Specialty: No UCSD MEDICAL GROUP

 **9415 CAMPUS POINT DR LA JOLLA, CA 92093**


 **Phone: (800) 926-8273**

Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Female




NPI: 1457694549

 **Provider English Spoken: Y**

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D. دليل مقدمي الخدمات المتخصصين



Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER




MICK, SHARON

Provider ID: 299645
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891061966
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group







CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299646
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891061966
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299650
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891061966
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299651
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291420

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1184386864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NACOSTE, LAKEISHA

Provider ID: 272935

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 822-5210

After Hours Phone: (858)
822-5210

Provider Gender: Female

NPI: 1194139634

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAULSON, KERRY

Provider ID: 201269

Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (619) 543-3000

After Hours Phone: (619)
543-3000

Provider Gender: Female

NPI: 1518363407

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RALEIGH, DEBORAH

Provider ID: 215016

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR

FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689006876

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROCHE, CHELSEA

Provider ID: 270706

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063040384

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291446

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1649934126

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281855

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA

Provider ID: 210795

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TOPPEN, LAURA

Provider ID: 215476

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TOPPEN, LAURA

Provider ID: 215475

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER




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D. دليل مقدمي الخدمات المتخصصين




 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA


Provider ID: 307671
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273



Provider Gender: Female
NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER



TREJO, ANA

Provider ID: 307670
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273




Provider Gender: Female
NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


TREJO, ANA

Provider ID: 307673
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER




TRUJILLO, DALE

Provider ID: 278428
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1003104423

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PRACTITIONER

TUCKER, LANIKA

Provider ID: 307658

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477325181

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299942

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1902368319

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256375

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952653404

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240764

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174893358

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256695

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1023194560

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN

Provider ID: 280553

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982059044

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KERN
MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FERRITER, STACY

Provider ID: 265296

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780725556

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN

Provider ID: 217366

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427419944

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299906

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083254205

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291443

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194134114

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291403

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487213500

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278004

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982133591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider ID: 301713
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1073241618

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210017
Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1518274919

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210051

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE

Provider ID: 210040

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1285667741

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

TH-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210057

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

TH-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210056

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301046

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270914

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

Fax: (888) 539-8781

After Hours Phone: (858)
657-7000

Provider Gender: Male

NPI: 1134326895

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, USC KENNETH

NORRIS JR CANCER

HOSPITAL, KECK HOSPITAL

OF USC, USC VERDUGO HILLS

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):



N

Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group








EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269292
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811289093
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, GROSSMONT
HOSPITAL, Los Angeles
General Medical Center,
TEMECULA VALLEY HOSPITAL
INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BAGBY, JESSICA







Provider ID: 271138
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1093161473
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BAGBY, JESSICA





Provider ID: 271135
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (858) 249-6800
Fax: (858) 404-9226
 After Hours Phone: (858)
249-6800
Provider Gender: Female
NPI: 1093161473
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271131
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1801207006
 Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


BLACK, NICHOLAS

Provider ID: 284415


Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154852689

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


CASTELLANO, TIFFANY

Provider ID: 271611

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (858) 249-6800

Fax: (858) 404-9226

 After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1063893063

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287427

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287429

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

GALUST, HENRIK

Provider ID: 300053

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932696093

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SAN

GORGONIO MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

GOODRICH, ANDREW

Provider ID: 271625

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245688415

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE




GUITTARD, JESSE



Provider ID: 239880
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-6400
 After Hours Phone: (858) 657-6400
Provider Gender: Male
NPI: 1770979890
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242545
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1164765046
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE





HERNANDEZ, CRISTINA

Provider ID: 278988
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (800) 926-8273

Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164765046
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 300006
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043705296
 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group


EMERGENCY MEDICINE

HOGUE, BRENNIA
Provider ID: 301710
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1043705296
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 240023
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1205214442
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KRESHAK, ALLYSON
Provider ID: 257564
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1194758219
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 283846
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1598295925

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283844

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598295925

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255938

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

☎ Phone: (858) 657-7125

Fax: (858) 657-7107

📞 After Hours Phone: (858)
657-7125

Provider Gender: Female

NPI: 1619014479

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255937

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 657-7125

Fax: (858) 657-7107

📞 After Hours Phone: (858)
657-7125

Provider Gender: Female

NPI: 1619014479

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 283150

Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1396270278
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 246900
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239796
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (858) 249-6800
After Hours Phone: (858)
249-6800
Provider Gender: Female
NPI: 1871732214

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285609
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1366478372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


PARK, JAY

Provider ID: 285608


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

QUENZER, FAITH


Provider ID: 243284


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295112670

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-8PM

M-F 8AM-5PM

SA 8AM-8PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

EMERGENCY MEDICINE


RUDOLF, FRANCES


Provider ID: 240160

Board Certified Specialty: No

UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7000

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1821487430

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

SABHA, MAHMOUD


Provider ID: 240450


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100


LA JOLLA, CA 92037

 Phone: (858) 249-6800

 After Hours Phone: (858)
249-6800

Provider Gender: Male

NPI: 1457747883

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A


IPA: UCSD Medical Group


EMERGENCY MEDICINE

SELTZER, JUSTIN

Provider ID: 283135

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447791843

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 300008

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871099333


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


SUPAT, BENJAMIN

Provider ID: 299907

Board Certified Specialty: No

UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1376772905

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


WINKLER, GARRET

Provider ID: 271416

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1336502095

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN





Provider ID: 269938
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273



Provider Gender: Male
NPI: 1225425697
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN




Provider ID: 269937
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1225425697
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 299985
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1528564150
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female

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NPI: 1528564150
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1265695795

Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin

Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255623
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 962-8273
 Fax: (888) 539-8781

After Hours Phone: (800) 962-8273

Provider Gender: Female
 NPI: 1932324175

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287778
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR
 LA JOLLA, CA 92037

Phone: (800) 926-8273
 Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1720474141

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PETTUS, JEREMY

Provider ID: 303286
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
 LA JOLLA, CA 92037

Phone: (800) 926-8273
 Fax: (888) 539-8781

After Hours Phone: (800)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

926-8273
 Provider Gender: Male
 NPI: 1225234982
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA
 Provider ID: 256092
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1518163799
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
 Provider ID: 207166
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 MEDICAL CENTER
 DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1265810337
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
 Provider ID: 207165
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1265810337
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
 Provider ID: 300056
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR

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D. دليل مقدمي الخدمات المتخصصين

LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1114366192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 256954
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1750339446
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 256954
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750339446
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 272836
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 543-2347
Fax: (858) 657-7259
After Hours Phone: (619) 543-2347
Provider Gender: Male
NPI: 1861626814
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 270449
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588081814

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270448

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 925-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 925-8273

Provider Gender: Male

NPI: 1588081814

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

FEJLEH, MOHAMMAD

Provider ID: 271043

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
STE 2C

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1205240959

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

FEJLEH, MOHAMMAD

Provider ID: 271042

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1205240959

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299952

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1780047597

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299953

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780047597

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

HOLMER, ARIELA

Provider ID: 273216

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083032544

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283898

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283897

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY


TSAI, MATTHEW

Provider ID: 252369

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY


TSAI, MATTHEW

Provider ID: 252368

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300025

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300023

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

Min/Max Age: 0\None

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282165

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144486929

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, EARL AND
LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
Providence St Joseph Hospital,
Providence St Jude Medical
Center, ORANGE COAST MEM
MED CTR, FOUNTAIN VALLEY
REGIONAL HOSP AND MED
CTR, FOUNTAIN VALLEY
REGIONAL HOSP AND MED
CTR, CORONA REGIONAL
MED CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS

Provider ID: 246594

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (858) 822-6100

After Hours Phone: (858)
822-6100

Provider Gender: Male

NPI: 1518134923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303057

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303058

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781


After Hours Phone: (800)
926-8273

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1245694801

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY


HAMDAN, AYAD


Provider ID: 241429

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3960 HEALTH SCIENCES
DRIVE


LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144431230

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN

Provider ID: 202663

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN

Provider ID: 202664

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN


Provider ID: 202662

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1982995809

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU-SA 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY


PARK, SOO

Provider ID: 257202

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1821351198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY


RICHARDSON, ANGELIQUE


Provider ID: 215010

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1700120102

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HEMATOLOGY / ONCOLOGY


STEWART, TYLER

Provider ID: 243920

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1699110676

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272717

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR

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D. دليل مقدمي الخدمات المتخصصين

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 247584
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689633729

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 275792
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689633729
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB

Provider ID: 241954
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023301991
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB

Provider ID: 241952

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
STE 2C

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023301991

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE

MEDICINE

RUBENSIK, TAMARA

Provider ID: 245574

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA

Provider ID: 275069

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1033128376

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA

Provider ID: 275070

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033128376

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

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D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

FIRESTEIN, CATHERINE

Provider ID: 275388

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427348382

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

HAMMOND, CHARLES


Provider ID: 278589

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033641816

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

SHINDO, YURI

Provider ID: 284744

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700271939

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

TONG, ALEXANDER

Provider ID: 300046

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1356804926

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301059

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538346317

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH

CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 299947

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301057

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538346317

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health

Care, STANFORD HEALTH

CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1659720555

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

INFECTIOUS DISEASE

TANG, MICHAEL

Provider ID: 300063

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982018545

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273984

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (760) 471-9186

Fax: (619) 543-8255

☎ After Hours Phone: (760) 471-9186

Provider Gender: Female

NPI: 1801184973

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): **CHENG, GEORGE**

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273985

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1801184973

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

Provider ID: 247640

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1316174568

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286669

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1417343732

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214385

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1225019193

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, UC DAVIS

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

IVANOV, MARGARET

Provider ID: 272876

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1326427014

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

JABBOUR, MOUSSA

Provider ID: 256658

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1255741633

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272937

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730507872

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274004

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274002

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238624

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE


LAGO HERNANDEZ, CARLOS

Provider ID: 238623

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274409

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE


MAJITHIA, AMIT

Provider ID: 255881

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801091459

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

MARTINEZ, ARMANDO

Provider ID: 291422

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1598261091

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

NOKES, BRANDON


Provider ID: 287581

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

POTOK, OLIVIA

Provider ID: 272707

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073951323

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

 After Hours Phone: (619)
471-9186

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273964

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273963

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 471-9186

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D. دليل مقدمي الخدمات المتخصصين

JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

SMITH, CHELSEY


Provider ID: 239921


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE 2B


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE


TAYLOR, DAVID

Provider ID: 274470

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033572995

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE


WANG, ANGELA

Provider ID: 259536

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730133976

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE


YADLAPATI, RENA


Provider ID: 238587

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1548597784

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE


YADLAPATI, RENA

Provider ID: 238586

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1548597784

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

YANG, JENNY


Provider ID: 283025

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE


ZHANG, SHERRY

Provider ID: 272658

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

ALOTAIBI, MONA

Provider ID: 271480

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174933915

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BOROK, ZEA

Provider ID: 284703

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800)
926-5273

Provider Gender: Female

NPI: 1750317251

Provider English Spoken: Y

Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, Los

Angeles General Medical
Center, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

ODISH, MAZEN

Provider ID: 271468

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992141428

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

TRAN, LINH

Provider ID: 271938

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851682728

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL


Provider ID: 275993


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
FL 1


LA JOLLA, CA 92037

 Phone: (858) 657-8530

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1861623506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER,
LOMA LINDA UNIVERSITY
MED CTR MURRIETA,
TEMECULA VALLEY HOSPITAL

INC


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERVENTIONAL CARDIOLOGY


CRUZ RODRIGUEZ, JOSE

Provider ID: 300062

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR


Provider ID: 303097

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

 Phone: (858) 800-2480

Fax: (858) 216-1908

 After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

GOVEA, ALAYN

Provider ID: 300030
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1972997104
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
LAKEWOOD REGIONAL MED
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TAUB, PAM


Provider ID: 277681
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1346355161

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A


IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TAUB, PAM

Provider ID: 277682
Board Certified Specialty: No
UCSD MEDICAL GROUP


 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273


Provider Gender: Female
NPI: 1346355161


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A


IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 210604
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

 Phone: (858) 657-8530
Fax: (858) 657-8814

 After Hours Phone: (858)
657-8530

Provider Gender: Male
NPI: 1063701068




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS




Provider ID: 209561
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1871767384

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, EISENHOWER
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI



Provider ID: 300009
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Female

NPI: 1245627421
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

HULL, ANDREW

Provider ID: 209482
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8745
 After Hours Phone: (858)
657-8745

Provider Gender: Male




NPI: 1902862121

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE

Provider ID: 208639

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 240599

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)

Spoken: Hungarian,

Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208642

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)

657-8745

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS

Provider ID: 209383

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7200

After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish




Cultural Competency: N

Hospital Affiliation: SCRIPPS





MEMORIAL HOSPITAL,




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين





SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group




MATERNAL AND FETAL MEDICINE

WOLF, RICHARD
Provider ID: 209252
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1497713846
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 283287
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 249-5800
 After Hours Phone: (858)
249-5800
Provider Gender: Female
NPI: 1528454188
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

DELROSARIO, PAMELA
Provider ID: 295001
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 249-5800
 Fax: (858) 249-5839
 After Hours Phone: (858)
249-5800
Provider Gender: Female
NPI: 1952691941
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL): N
Website: N/A

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294252

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858) 249-5800

Provider Gender: Female

NPI: 1245617489

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206207

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858) 249-5800

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206209

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858) 626-4123

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

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Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 299893

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297977

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

9300 CAMPUS POINT DR
STE 8

LA JOLLA, CA 92037

Phone: (858) 657-7000

Fax: (858) 249-5839

After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285931

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH

NETWORK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1942253356

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301824

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

626-4123
Provider Gender: Female
NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS
Provider ID: 206062
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 249-5800
Fax: (619) 543-3812
 After Hours Phone: (858)
249-5800
Provider Gender: Male
NPI: 1205047545
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO
Provider ID: 206170
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 249-5800
Fax: (858) 249-5839
 After Hours Phone: (858)
249-5800
Provider Gender: Female

NPI: 1649433103
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES
Provider ID: 303908
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 9300 CAMPUS POINT DR
FL 8
LA JOLLA, CA 92037
 Phone: (858) 249-5800
Fax: (858) 249-5839
 After Hours Phone: (858)
249-5800
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES


Provider ID: 303907

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858) 626-4123

Provider Gender: Male


NPI: 1538388988


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY


BEVINS, ELIZABETH

Provider ID: 277726

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1013395151


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


NEUROLOGY


COUGHLIN, DAVID

Provider ID: 240950

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273



 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE




Provider ID: 246701
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8540
 After Hours Phone: (858) 657-8540
Provider Gender: Male
NPI: 1053326710
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A




IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID

Provider ID: 246264
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871884130

 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY


QAYOUMI, WALI


Provider ID: 284369
Board Certified Specialty: No


UCSD MEDICAL GROUP

 9500 GILMAN DR STE 2069

LA JOLLA, CA 92093

 Phone: (858) 822-5881

 Fax: (888) 539-8781

 After Hours Phone: (858) 822-5881

Provider Gender: Male

NPI: 1093178220

 Provider English Spoken: Y

 Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY


QAYOUMI, WALI

Provider ID: 284371

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (619) 284-3746

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 579-8781

☎ After Hours Phone: (619) 284-3746

Provider Gender: Male

NPI: 1093178220

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

SCHULTE, JESSICA

Provider ID: 284819

Board Certified Specialty: No UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (858) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1467870576

☑ Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

NUCLEAR MEDICINE

SHARIF TABRIZI, AHMAD

Provider ID: 300029

Board Certified Specialty: No UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1053727313

☑ Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: Providence

St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273225

Board Certified Specialty: No UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174758031

☑ Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291323

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291324

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291335

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257546

Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR

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D. دليل مقدمي الخدمات المتخصصين

STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891749842
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278916
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 923-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
923-8273

Provider Gender: Male
NPI: 1457662868
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278918
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1457662868
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208295
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1104143593
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242752
Board Certified Specialty: No
UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1972047397

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271558
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1780073635

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271559
Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1780073635

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 286230
Board Certified Specialty: No
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781


After Hours Phone: (800)
926-8273




Provider Gender: Female
NPI: 1396904876

Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303062
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*




Provider Gender: Female
NPI: 1770702177

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY




MACKAY, GILLIAN

Provider ID: 200964
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1770702177

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 9AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY




MEADOWS, AUDRA

Provider ID: 285739
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 657-8745*
Fax: (888) 539-8781

 *After Hours Phone: (858) 657-8745*


Provider Gender: Female
NPI: 1467585521

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285740
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE 200

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D. دليل مقدمي الخدمات المتخصصين

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1467585521
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA
Provider ID: 299920
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295232973
🗣 Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE
Provider ID: 299977
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447530696

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE
Provider ID: 299976

Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447530696

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE
Provider ID: 284296
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9333 GENESEE AVE STE
340
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295263861
🗣 Provider English Spoken: Y
Cultural Competency: N




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY


RIVAS, RENEE

Provider ID: 284295
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1295263861


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284297
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1295263861


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284289

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1306372800

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285173

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689013468

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285175

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689013468

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

AMARAL, MARGARET

Provider ID: 258303

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

☎ Phone: (858) 657-6879
Fax: (858) 657-6873

📞 After Hours Phone: (858)
657-6879

Provider Gender: Female
NPI: 1689874521

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

COLLINS, RESENIA

Provider ID: 258356

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

☎ Phone: (858) 657-6879
Fax: (858) 657-6873

📞 After Hours Phone: (858)
657-6879

Provider Gender: Female
NPI: 1184936718

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR

Provider ID: 288724

Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790268100

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

SMITH, EMILY

Provider ID: 258537

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1417337403

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

SOROKIN, LISA

Provider ID: 258362

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1336445063

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787

Board Certified Specialty: No
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (888) 539-8781

After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1912325184

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-5PM
SA 7:45AM-2PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272802

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942662168

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 215055

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299965

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427102979

Provider English Spoken: Y
Provider Language(s)
Spoken: French, German,

Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

SATTERFIELD, KELLIE

Provider ID: 305303

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

9834 GENESEE AVE STE
200

LA JOLLA, CA 92037

Phone: (858) 457-3050

Fax: (858) 457-0851

After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1629509336

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS




MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None






American Sign Language (ASL):




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N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

SCHONBACH, ETIENNE




Provider ID: 284432
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1073040580
 Provider English Spoken: Y
 Provider Language(s) Spoken: German
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group




OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305309




Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 9834 GENESEE AVE STE 200
 LA JOLLA, CA 92037
 Phone: (858) 457-3050
 Fax: (858) 457-0851
 After Hours Phone: (858) 457-3050

Provider Gender: Female
 NPI: 1932605649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY



SHEILS, CATHERINE

Provider ID: 299935
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)

926-8273
 Provider Gender: Female
 NPI: 1932605649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1932605649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group


OPHTHALMOLOGY


SONG, DELU

Provider ID: 284425

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437689536

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group


OPHTHALMOLOGY


TOPILOW, NICOLE

Provider ID: 284348

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1215468376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

AOTO, KIM


Provider ID: 296798


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037


 Phone: (800) 898-2020


 Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9AM-5PM

TU 8:30AM-4:30PM

W 7:30AM-4:15PM

TH 9:30AM-5PM

F 8:30AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


OPTOMETRIST


HOO, PAMELA

Provider ID: 269621

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 534-6290

 Fax: (858) 822-4438

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 534-6290

Provider Gender: Female

NPI: 1275566010

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299914

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1861164642

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299915

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1861164642

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

KIM, PHILIP

Provider ID: 287909

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8372

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8372

Provider Gender: Male

NPI: 1376929034

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

MCCLEAN, ESMERALDA

Provider ID: 269907

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 9415 CAMPUS POINT DR LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 534-8293

☎ After Hours Phone: (858) 534-6290

Provider Gender: Female

NPI: 1962817981

☑ Provider English Spoken: Y




☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N








Hospital Affiliation: UCSD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC






OPTOMETRIST

VO, ANDREW
Provider ID: 304148
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1790291565
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A


IPA: UCSD Medical Group








OPTOMETRIST

VO, ANDREW
Provider ID: 201311
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
 After Hours Phone: (858)
534-6290






Provider Gender: Male
NPI: 1790291565
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 258078
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1639697451
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 301682
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1639697451
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OPTOMETRIST

YU, CAROL


Provider ID: 301681

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299636

Board Certified Specialty: No

UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299633

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: UCSD Medical Group


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299637

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299463

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299460

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299459

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299458

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (858) 822-6197

Fax: (858) 822-6198

After Hours Phone: (858)
822-6197

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299584

Board Certified Specialty: No

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UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299580

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299581

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299585

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299570

Board Certified Specialty: No

UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299564

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 657-8590

After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299565

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8590

After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299566

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299529

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781


After Hours Phone: (800)
926-8273


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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PIH


HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

FRIEDMAN, RICK


Provider ID: 299533

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES

DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH


HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299534

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299528
Board Certified Specialty: No
UCSD MEDICAL GROUP


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,

ORANGE COUNTY GLOBAL

MEDICAL CENTER INC,

CHAPMAN GLOBAL MEDICAL

CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299562

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299563

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY






GILANI, SAPIDEH

Provider ID: 299558





Board Certified Specialty: No
UCSD MEDICAL GROUP



 9350 CAMPUS POINT DR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1003825571
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group




OTOLARYNGOLOGY

GILANI, SAPIDEH
 Provider ID: 299557
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1003825571
 Provider English Spoken: Y
 Cultural Competency: N







Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY




GREENE, JACQUELINE
 Provider ID: 298398
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1144583931
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
 Provider ID: 272958
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 STE LLA
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1144583931
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
 Provider ID: 298394
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

926-8273
 Provider Gender: Female
 NPI: 1144583931
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
 Provider ID: 298395
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1144583931
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
 Provider ID: 299573
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1417988783
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
 Provider ID: 299574
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1417988783
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
 Provider ID: 299578
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1417988783
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 299512

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: UCSD Medical Group


OTOLARYNGOLOGY

HARRIS, JEFFREY


Provider ID: 299577

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299512

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299516

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299513

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

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CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299517

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301051

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299444

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS

ANGELES, PIH HEALTH

HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299448

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299442

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 857-8590

☎ After Hours Phone: (858) 857-8590

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299447

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 294828

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 857-8590

☎ After Hours Phone: (858) 857-8590

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH


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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299484

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299479

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299478

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OTOLARYNGOLOGY


MAGIT, ANTHONY

Provider ID: 299483

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299593

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299594

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299589

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299588

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9400 CAMPUS POINT DR LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y

Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299605

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299609

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299604

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299608

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese



Cultural Competency: N

Hospital Affiliation: UCSD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW



Provider ID: 299505
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW




Provider ID: 299504
Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 Phone: (858) 822-6197
 After Hours Phone: (858) 822-6197

Provider Gender: Male
NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW



Provider ID: 299510
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299506

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299640

Board Certified Specialty: Yes
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299644

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299638

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8590

Fax: (858) 657-8682

After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299643

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299611

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8590

After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299616

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299613

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299612

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

DR
LA JOLLA, CA 92093
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1366590853
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298411
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s)

Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 242138
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298416
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298415

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

FADARE, OLUWOLE

Provider ID: 275706

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619955804

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

HANSEN, LAWRENCE

Provider ID: 275768

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760407498

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA

Provider ID: 275889

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1629163100
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PATEL, CHARMI

Provider ID: 259112
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1730389362
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Gujarati, Hindi
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL

CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD

Provider ID: 275815
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1275084295
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL



AISAGBONHI, OMONIGHO




Provider ID: 201304
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1043571045




Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS GREEN
 HOSPITAL, SCRIPPS GREEN
 HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين





PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group






PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 275750
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1043571045
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS GREEN
 HOSPITAL, SCRIPPS GREEN
 HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):







PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH

Provider ID: 275757
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1174814065
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 UCSD MEDICAL CTR, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS,
 SCRIPPS GREEN HOSPITAL,
 SCRIPPS GREEN HOSPITAL
 Medi-Cal Open Panel: Yes

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN

Provider ID: 275722
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1184674145
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK

Provider ID: 275746

Board Certified Specialty: No
UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE

Provider ID: 247149

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-4410

After Hours Phone: (858)
249-4410

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE

Provider ID: 275816

Board Certified Specialty: No
UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ELKIND, JAE

Provider ID: 284903

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922497700

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PATHOLOGY ANATOMIC CLINICAL


HU, JINGJING

Provider ID: 243965

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


PATHOLOGY ANATOMIC CLINICAL


HU, JINGJING

Provider ID: 243966

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES

Provider ID: 275827

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295912657

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED

Provider ID: 275782

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679521579

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

VAVINSKAYA, VERA

Provider ID: 275840

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9444 MEDICAL CENTER DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174757181

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

ZARE, SOMAYE

Provider ID: 275814

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9444 MEDICAL CENTER DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1700334802

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

ZARE, SOMAYE

Provider ID: 203172

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1700334802

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZHANG, HAIYAN

Provider ID: 275841
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): HOSPITAL

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


PATHOLOGY ANATOMIC CLINICAL

ZHANG, HAIYAN

Provider ID: 203176

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


IPA: UCSD Medical Group


PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 275735

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1174679849

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, EL CENTRO REGIONAL

MEDICAL CENTER

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

LE DZUNG, THE



Provider ID: 275733
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Male
NPI: 1770526931



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*
 *Website: N/A*

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


AINSWORTH, DELISSA


Provider ID: 243366

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1750734893


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284764

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1235653148

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT

ALLERS, JENNA

Provider ID: 301037

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1730605486

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SALINAS
VALLEY MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


ARMEEN, GARY

Provider ID: 247036

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217650

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


BRUECKNER, TAMMIE


Provider ID: 255557

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


CHERRY, REENA


Provider ID: 243349

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female




NPI: 1689729683

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 269494
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273




Provider Gender: Female
NPI: 1689729683

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT




COOKISH, DAVID

Provider ID: 286591
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1215338884

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CRIFE, TAYLOR

Provider ID: 210983




Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1659827087

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

DEMASCO, MICHAEL

Provider ID: 278969
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1467926295
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

DEMOOR, PATRICIA
Provider ID: 212879
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1477721702
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 247205
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1225698962

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287136
Board Certified Specialty: No

UCSD MEDICAL GROUP
📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1861624181

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287135
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Male
NPI: 1861624181
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1114459765
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287450
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1114459765
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 279334
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (800) 826-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
826-8273

Provider Gender: Male
NPI: 1114459765
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298432
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1114459765
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER

Provider ID: 309996

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER

Provider ID: 309997

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265147

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 554-1212

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

LIN, JOYCE

Provider ID: 265146

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 888-9268
Fax: (888) 539-8781

After Hours Phone: (800)
888-9268

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279015

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279014

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305025

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider ID: 305024
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1093440836
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305027
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093440836
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280612
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1104371251

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258039
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386032308
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278016
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1497129860

Provider English Spoken: Y

Provider Language(s)

Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278017

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1497129860

Provider English Spoken: Y

Provider Language(s)

Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293442

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093

Phone: (800) 926-8276

Fax: (888) 539-8784

After Hours Phone: (800) 926-8276

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293440

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

Phone: (858) 822-7967

Fax: (858) 822-6395

After Hours Phone: (858) 822-7967

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAU, MARK

Provider ID: 283584

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAU, MARK

Provider ID: 283583

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253254

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-5540

After Hours Phone: (619)
543-5540

Provider Gender: Female

NPI: 1265960256

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253255

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-7876

After Hours Phone: (858)
657-7876

Provider Gender: Female

NPI: 1265960256

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROMO, JORGE

Provider ID: 309983

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275962383

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PROVIDER


 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SAIKHON, TALIA



Provider ID: 293439
Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1699263905

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


SANCHEZ, MICHAEL

Provider ID: 206907
Board Certified Specialty: No

UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR
STE 110

LA JOLLA, CA 92037
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1184135006


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHWARTZEL, KEVIN

Provider ID: 214276
Board Certified Specialty: No
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)


926-8273


Provider Gender: Male
NPI: 1104277847

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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


 Website: N/A
IPA: UCSD Medical Group


PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247976
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8373


 After Hours Phone: (800)
926-8373

Provider Gender: Female
NPI: 1336659507

 Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT




SHAUL, SHERA

Provider ID: 247975
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1336659507




Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305010
Board Certified Specialty: No
UCSD MEDICAL GROUP



 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Male
NPI: 1124593926

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 277072
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (800) 926-8273
 After Hours Phone: (800)
926-8273



Provider Gender: Female
NPI: 1942724042

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT



WAHLIN, TAMARA

Provider ID: 299601
Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299602
Board Certified Specialty: No
UCSD MEDICAL GROUP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299596

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278202

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932494499

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

BAILIS, JESSICA

Provider ID: 300043

Board Certified Specialty: No
UCSD MEDICAL GROUP

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1760739049

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209117

Board Certified Specialty: No
UCSD MEDICAL GROUP

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273





After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568893162

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST




BOOTH, CHRISTOPHER


Provider ID: 209118
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568893162
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 258988
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
 Phone: (858) 246-1654
 After Hours Phone: (858) 246-1654
Provider Gender: Male
NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 302876
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3344 N TORREY PINES CT
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 240034
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

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D. دليل مقدمي الخدمات المتخصصين

CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST

CHESHER, NICHOLAS


Provider ID: 273812

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST


CRANDAL, BRENT

Provider ID: 291463

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1588739452

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST


DUARTE, KRISTEN

Provider ID: 255479

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST


DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

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D. دليل مقدمي الخدمات المتخصصين

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST


EICHEN, DAWN

Provider ID: 302888

Board Certified Specialty: No

UCSD MEDICAL GROUP

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

EICHEN, DAWN


Provider ID: 245715

Board Certified Specialty: No


UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

EICHEN, DAWN


Provider ID: 259524

Board Certified Specialty: No

UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

Fax: (858) 246-3181

 After Hours Phone: (858)
246-1654

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

LASSWELL, EVE


Provider ID: 208260


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273

Provider Gender: Female




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.D دليل مقدمي الخدمات المتخصصين

NPI: 1013483635

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273640
Board Certified Specialty: No
UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST

MAGINOT-CHESSER, TAMARA


Provider ID: 273224

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 534-7792

Fax: (619) 471-9017

 After Hours Phone: (858)
534-7792

Provider Gender: Female

NPI: 1043441165

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST


MENDEZ, ANDRES

Provider ID: 279058

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841482692

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

PELHAM, WILLIAM

Provider ID: 307681

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR
STE C101

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D. دليل مقدمي الخدمات المتخصصين

LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1306629399

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

REED, KRISTIE

Provider ID: 291395

Board Certified Specialty: No
UCSD MEDICAL GROUP

8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800) 926-8372

Provider Gender: Female

NPI: 1679869556

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

REED, KRISTIE

Provider ID: 302867

Board Certified Specialty: No
UCSD MEDICAL GROUP

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1679869556

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303116

Board Certified Specialty: No
UCSD MEDICAL GROUP

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1659920403

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

THOMAS, KELSEY

Provider ID: 310060

Board Certified Specialty: No
UCSD MEDICAL GROUP

8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female



NPI: 1700264264

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group


PSYCHOLOGIST

ZLATAR, ZVINKA

Provider ID: 272712

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497139059

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299925

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


PULMONARY DISEASES


JOSHUA, JISHA

Provider ID: 238060

Board Certified Specialty: No
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Malayalam

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299987

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED CTR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES


PEARCE, ALEX

Provider ID: 300054

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265896856


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


BERMAN, ZACHARY

Provider ID: 269319

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


BRANCH, CODY

Provider ID: 283676

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


CARSWELL, AIMEE

Provider ID: 303056

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N 🇺🇸 Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group</p>	<p>Provider ID: 299993 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037 📞 Phone: (800) 926-8273 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1639553613 🗣️ Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group</p>	<p>Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group</p>
<p>RADIOLOGY DIAGNOSTIC CHENG, KAREN Provider ID: 283227 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037 📞 Phone: (800) 926-8273 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1427430511 🗣️ Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: UCSD Medical Group</p>	<p>RADIOLOGY DIAGNOSTIC FORCIER, NANCY Provider ID: 286955 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037 📞 Phone: (800) 926-8273 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1497721724 🗣️ Provider English Spoken: Y Cultural Competency: N</p>	<p>RADIOLOGY DIAGNOSTIC FOWLER, KATHRYN Provider ID: 201290 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037 📞 Phone: (800) 926-8273 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1255457941 🗣️ Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS,</p>
<p>RADIOLOGY DIAGNOSTIC FAZELI, SOUDABEH</p>		

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SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY




Provider ID: 271568
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY




Provider ID: 282790
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1992120026

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

HORKY, LAURA




Provider ID: 241854
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1598967812

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241855
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1598967812

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299959

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271128

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1770825457

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, PROVIDENCE

LITTLE CO OF MARY MED CTR

TORRANCE, PROVIDENCE

LITTLE CO OF MARY MED CTR

SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307767

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427496710

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

Board Certified Specialty: No

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UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299967

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240343

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين


MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299950

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283311

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, LOMA LINDA


UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


SPENGLER, NATHAN

Provider ID: 303050

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309704

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 268545

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240406

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


TADROS, ANTHONY

Provider ID: 268545

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


UNSDORFER, KYLE

Provider ID: 300036

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


VAHDAT, NOUSHIN

Provider ID: 300069

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283518
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307677

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1346482809

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE

Provider ID: 268249

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1356478929

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST


BERGERON, PATRICK

Provider ID: 206533

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK

Provider ID: 258296

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246021

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

CHIEN, PEI

Provider ID: 258324

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

CHIEN, PEI

Provider ID: 214699

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

HOUSELY, ALEXIS

Provider ID: 299971

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689321416

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MAROLLA, ALICE

Provider ID: 241145

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477018729

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 258372

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

☎ Phone: (855) 543-0333

Fax: (858) 657-6873

📞 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1831539337

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207559

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST


SKINNER, NICOLE

Provider ID: 206546

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1386964997

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY

Provider ID: 258442

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST


TRIMM, CASSIDY

Provider ID: 258443

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST


VASQUEZ, BENJAMIN

Provider ID: 200968

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273

Provider Gender: Male


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D. دليل مقدمي الخدمات المتخصصين

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN


Provider ID: 258480
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 Phone: (858) 657-6879
Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879



Provider Gender: Male
NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY


Provider ID: 258496
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 Phone: (858) 657-6879
Fax: (858) 657-6873



 After Hours Phone: (858)
657-6879

Provider Gender: Female
NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

YU, AUDRINE


Provider ID: 258481
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 Phone: (858) 657-6879
Fax: (858) 657-6873



 After Hours Phone: (858)
657-6879

Provider Gender: Female
NPI: 1639271208

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288938
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288939

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 265338

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273364

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286388

Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100

Provider Gender: Female
NPI: 1518163005

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278551
Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235369067

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA

Provider ID: 286371
Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801812656

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA

Provider ID: 284408
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144616541

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

POTENZA, BRUCE

Provider ID: 277299

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-7200

After Hours Phone: (619)
543-7200

Provider Gender: Male

NPI: 1548281496

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE

Provider ID: 284419

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1548604648

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211905

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211904

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL


ARMANI, AVA


Provider ID: 282142

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858) 822-6100

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL


CLARY, BRYAN


Provider ID: 202568

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982787131

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL


HORGAN, SANTIAGO

Provider ID: 286380

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR


LA JOLLA, CA 92037

 Phone: (619) 471-0755

 After Hours Phone: (619) 471-0755

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY GENERAL


JACOBSEN, GARTH

Provider ID: 201728

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 471-0755

 After Hours Phone: (619) 471-0755

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y




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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272304

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033529201

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL


VASCULAR


BARLEBEN, ANDREW

Provider ID: 275371

Board Certified Specialty: Yes
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

VASCULAR


BARLEBEN, ANDREW

Provider ID: 275373

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

VASCULAR

GAFFEY, ANN

Provider ID: 287012

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1316232010

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206760

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (858) 657-7777

Fax: (858) 657-5058

After Hours Phone: (858)
657-7777

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284935

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284936

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 275678

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
STE 2A

LA JOLLA, CA 92037

Phone: (619) 543-5540

Fax: (619) 287-7663

After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1093730251

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEAUMONT, THOMAS

Provider ID: 214126

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 657-8540

After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1497067573

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244070

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942469663

Provider English Spoken: Y

Provider Language(s)

Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270282

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

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D. دليل مقدمي الخدمات المتخصصين


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL

HATEFI, DUSTIN


Provider ID: 310034

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL


MARSHALL, LAWRENCE

Provider ID: 244149

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1750306171

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL

MURTHY, NIKHIL


Provider ID: 299995

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (619) 543-5540

Fax: (888) 539-8781

 After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242005

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242006

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244159

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244133

Board Certified Specialty: Yes
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: N/A
IPA: UCSD Medical Group


SURGERY ORTHOPEDIC

ANDRY, JAMES


Provider ID: 302085
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 9834 GENESEE AVE STE 228

LA JOLLA, CA 92037


 Phone: (858) 455-9942

Fax: (858) 455-6473

 After Hours Phone: (858) 455-9942

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


SURGERY ORTHOPEDIC

BUKATA, SUSAN


Provider ID: 277947

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1932140639


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC


CHIARAPPA, FRANK


Provider ID: 244460

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932536828

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY ORTHOPEDIC

CHOI, JIHOON


Provider ID: 284787

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285097741

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284786

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8181

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY ORTHOPEDIC


FLINT, JAMES

Provider ID: 203177

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284792

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284793

Board Certified Specialty: No
UCSD MEDICAL GROUP



 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730542747
 Provider English Spoken: Y
 Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group






SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS
Provider ID: 303194
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
 Phone: (858) 455-9942
 Fax: (858) 455-6473
 After Hours Phone: (858) 455-9942
Provider Gender: Male





NPI: 1396185161
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, TRI CITY MEDICAL CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER
Provider ID: 302103
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
 Phone: (858) 455-9942



Fax: (858) 455-6473
 After Hours Phone: (858) 455-9942
Provider Gender: Male
NPI: 1497751457
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL, SHARP SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS
Provider ID: 285245
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437565488

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group	Network, UCSD Medical Group
<hr/> SURGERY PLASTIC <hr/>		
 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group	HINCHCLIFF, KATHARINE Provider ID: 277289 Board Certified Specialty: No UCSD MEDICAL GROUP  9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1346674561	REID, CHRISTOPHER Provider ID: 224796 Board Certified Specialty: No UCSD MEDICAL GROUP  9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (800) 926-8273  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1982964276
<hr/> SURGERY ORTHOPEDIC <hr/>		
SULLIVAN, THOMAS Provider ID: 285246 Board Certified Specialty: No UCSD MEDICAL GROUP  9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1437565488	 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health	 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group
<hr/> SURGERY THORACIC <hr/>		
	BOYS, JOSHUA Provider ID: 243533 Board Certified Specialty: No UCSD MEDICAL GROUP	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7777
After Hours Phone: (858)
657-7777

Provider Gender: Male
NPI: 1114368990

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK

Provider ID: 274296

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8817

Fax: (888) 539-8781

After Hours Phone: (858)
657-8817

Provider Gender: Male

NPI: 1033683719

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: CEDARS

SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK

Provider ID: 274297

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (858) 647-8817

Fax: (858) 853-9878

After Hours Phone: (858)
647-8817

Provider Gender: Male

NPI: 1033683719

Provider English Spoken: Y
Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: CEDARS

SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS

Provider ID: 210576

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871752956

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

RAMIREZ, ALFREDO


Provider ID: 256390


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003829417

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC


ZANDER, ASHLEY


Provider ID: 291383


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC


ZANDER, ASHLEY


Provider ID: 291381


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

ZANDER, ASHLEY


Provider ID: 291382


Board Certified Specialty: No


UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

UROLOGY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-7876

Fax: (888) 539-8781

After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1902814379

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

UROLOGY

HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 249-3534

After Hours Phone: (858)
249-3534

Provider Gender: Male

NPI: 1073758652

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

UROLOGY

KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

UROLOGY

WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes
PURUSHOTHAM AND AKTHER

KOTHA MD INC

8860 CENTER DR STE 400
LA MESA, CA 91942

Phone: (619) 229-1995

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (619) 229-1109

☎ After Hours Phone: (619) 229-1995

Provider Gender: Male

NPI: 1093730814

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Hindi, Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA

Provider ID: 265393

Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

📍 5565 GROSSMONT CENTER DR STE 202 LA MESA, CA 91942

☎ Phone: (619) 461-6130

Fax: (619) 461-3108

☎ After Hours Phone: (619) 461-6130

Provider Gender: Male

NPI: 1710996384

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Kannada, Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI

Provider ID: 290704

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 8851 CENTER DR STE 304 LA MESA, CA 91942

☎ Phone: (619) 867-0557

Fax: (619) 867-0558

☎ After Hours Phone: (619) 867-0557

Provider Gender: Male

NPI: 1154323996

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Bulgarian, Russian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 295955

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 8851 CENTER DR STE 501 LA MESA, CA 91942

☎ Phone: (619) 697-2456

Fax: (858) 429-7930

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (619) 697-2456

Provider Gender: Female

NPI: 1457670119

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

RESELLI, LYNDSEY

Provider ID: 217693

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 8881 FLETCHER PKWY STE 205

LA MESA, CA 91942

☎ Phone: (619) 464-6434

☎ After Hours Phone: (619) 464-6434

Provider Gender: Female

NPI: 1558854000

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE

PRACTITIONER

RESELLI, LYNDSEY

Provider ID: 217692

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

☎ Phone: (619) 464-6434

☎ After Hours Phone: (619) 464-6434

Provider Gender: Female

NPI: 1558854000

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942

☎ Phone: (619) 713-5375

Fax: (619) 713-5379

☎ After Hours Phone: (619) 713-5375

Provider Gender: Female

NPI: 1124360565

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

HEARING AID DEALER /

SUPPLIER

ANDERSON, ELAINE

Provider ID: 268693

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 589-5414

Fax: (619) 589-7391

After Hours Phone: (619)
589-5414

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD

Provider ID: 269161

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1275514986

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

YELLEN, LAURENCE

Provider ID: 269173

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1477680551

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,

USC Arcadia Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 272676

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL




Medi-Cal Open Panel: Yes




Min/Max Age: 0\19




American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين





N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network





 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE








MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE
 Provider ID: 244873
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1639153018
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

MATERNAL AND FETAL MEDICINE

MELBER, DORA
 Provider ID: 296997
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8851 CENTER DR STE 201
 LA MESA, CA 91942
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

REIMERS, REBECCA

Provider ID: 294656
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8851 CENTER DR STE 201
 LA MESA, CA 91942
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1801207634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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D. دليل مقدمي الخدمات المتخصصين

<p><u>MATERNAL AND FETAL MEDICINE</u></p> <p>REIMERS, REBECCA Provider ID: 294654 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p> <p>5555 GROSSMONT CENTER DR LA MESA, CA 91942 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female NPI: 1801207634 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>	<p>Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p> <p>5555 GROSSMONT CENTER DR LA MESA, CA 91942 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Male NPI: 1154305977 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>	<p>NETWORK</p> <p>5555 GROSSMONT CENTER DR LA MESA, CA 91942 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Male NPI: 1477563302 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>
<p><u>MATERNAL AND FETAL MEDICINE</u></p> <p>RICHARDSON, ALVIE Provider ID: 277317</p>	<p><u>MATERNAL AND FETAL MEDICINE</u></p> <p>SCHWENDEMANN, WADE Provider ID: 277305 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p>	<p><u>MATERNAL AND FETAL MEDICINE</u></p>

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WILLIAMS, KRISTIN

Provider ID: 277384

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

5555 GROSSMONT CENTER DR

LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1992847131

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND

NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR,

CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY

MOHAMMAD, AHMADSHAH

Provider ID: 39868

Board Certified Specialty: No
EAST COUNTY NEUROLOGY ASSOCIATES INC

8851 CENTER DR STE 307
LA MESA, CA 91942

Phone: (619) 337-7900

Fax: (619) 337-7902

After Hours Phone: (619) 337-7900

Provider Gender: Male

NPI: 1902973472

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, French, German, Pashto, Persian, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS

MERCY HOSPITAL, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269112

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5565 GROSSMONT CENTER DR BLDG 3 STE 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-4PM
TU-W 8:30AM-4PM
TH 8AM-4PM
F 8AM-0PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

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HAIGHT, BRUCE

Provider ID: 305885

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 295984

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-4PM
F 8AM-0PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 288660

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

7339 EL CAJON BLVD STE
J AND K

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 306768

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

5565 GROSSMONT
CENTER DR STE 551

LA MESA, CA 91942

Phone: (626) 206-0633

Fax: (760) 267-9160

After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
















MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY

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D. دليل مقدمي الخدمات المتخصصين

<p>CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 6\99 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>	<p>CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-4:30PM  Website: N/A IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>	<p>CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>
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OPHTHALMOLOGY	OPHTHALMOLOGY	OPTOMETRIST
<p>HUDSON, HENRY Provider ID: 297578 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942  Phone: (626) 412-4040 Fax: (760) 267-9160  After Hours Phone: (626) 412-4040 Provider Gender: Male NPI: 1851349195  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY</p>	<p>HUDSON, HENRY Provider ID: 297577 Board Certified Specialty: Yes IHP OF SOUTHERN CAL-PHP  5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942  Phone: (626) 206-0633 Fax: (760) 267-9160  After Hours Phone: (626) 206-0633 Provider Gender: Male NPI: 1851349195  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY</p>	<p>AOTO, KIM Provider ID: 288652 Board Certified Specialty: No COMMUNITY CARE IPA LLC  7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942  Phone: (619) 722-8460 Fax: (619) 722-8465  After Hours Phone: (619) 722-8460 Provider Gender: Female NPI: 1780935650  Provider English Spoken: Y  Provider Language(s) Spoken: Vietnamese Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):</p>





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N




 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OTOLARYNGOLOGY

MOSHTAGHI, OMID






Provider ID: 302380
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 **5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942**
 **Phone: (619) 464-3353**
Fax: (619) 464-6720
 **After Hours Phone: (619) 464-3353**
Provider Gender: Male
NPI: 1730675927
 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N




 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

SAEZ, NEIL





Provider ID: 302431
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 **5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942**
 **Phone: (619) 464-3353**
Fax: (619) 464-6720
 **After Hours Phone: (619) 464-3353**
Provider Gender: Male
NPI: 1518456508
 **Provider English Spoken: Y**
 **Provider Language(s) Spoken: Spanish**
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N




 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: IHP of Southern Cal-PHP

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297177
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 **5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942**
 **Phone: (619) 713-5375**
Fax: (619) 713-5379
 **After Hours Phone: (619) 713-5375**
Provider Gender: Male
NPI: 1942223664
 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**
 **Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM**
 **Website: N/A**
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE










PARKER, SHERINE

Provider ID: 205786
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين





RADY CHILDRENS HEALTH NETWORK





 5565 GROSSMONT CENTER DR STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
 Provider Gender: Female
 NPI: 1477626513
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: N
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN









Provider ID: 285936
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710


Provider Gender: Female
 NPI: 1619359718
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRICS

CLAY, CORRIE
 Provider ID: 278807
 Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT

 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942
 Phone: (619) 464-6434
 Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Provider Gender: Female
 NPI: 1437207750
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM
 SA 11:30AM-3:30PM
 Website: N/A
 IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA
 Provider ID: 309977
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 444
 LA MESA, CA 91942

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Phone: (619) 698-0606

Fax: (619) 698-0609

After Hours Phone: (619) 698-0606

Provider Gender: Female

NPI: 1437822434

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

HINKLE, CORINNE

Provider ID: 309954

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5565 GROSSMONT
CENTER DR STE 444
LA MESA, CA 91942

Phone: (619) 698-0606

After Hours Phone: (619) 698-0606

Provider Gender: Female

NPI: 1508451949

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Valleywise

Health Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

RAYMOND, ALAIN

Provider ID: 269057

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8851 CENTER DR STE 505
LA MESA, CA 91942

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619) 461-3880

Provider Gender: Male

NPI: 1164729125

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Haitian
Creole

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

WHITE, KYLE

Provider ID: 302382

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT
CENTER DR BLDG 3 STE
101

LA MESA, CA 91942

Phone: (619) 464-3353

Fax: (619) 464-7509

After Hours Phone: (619) 464-3353

Provider Gender: Male

NPI: 1922768860

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL

Provider ID: 308213

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

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D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (619) 303-7130

Fax: (619) 303-7150

📞 After Hours Phone: (619) 303-7130

Provider Gender: Male

NPI: 1396230298

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL

Provider ID: 308638

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

☎ Phone: (619) 303-7130

Fax: (619) 303-7150

📞 After Hours Phone: (619) 303-7130

Provider Gender: Male

NPI: 1396230298

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303099

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

☎ Phone: (619) 740-4500

Fax: (619) 740-8499

📞 After Hours Phone: (619) 740-4500

Provider Gender: Male

NPI: 1275929242

📄 Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221089

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

☎ Phone: (619) 740-4500

Fax: (619) 740-8499

📞 After Hours Phone: (619) 740-4500

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221104

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5555 GROSSMONT

CENTER DR

LA MESA, CA 91942

Phone: (619) 740-4500

Fax: (619) 740-8499

After Hours Phone: (619) 740-4500

Provider Gender: Male

NPI: 1225186232

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

RHEUMATOLOGY

KOTHA, ROSHAN

Provider ID: 63454

Board Certified Specialty: No

PURUSHOTHAM AND AKTHER

KOTHA MD INC

8860 CENTER DR STE 400

LA MESA, CA 91942

Phone: (619) 229-1995

Fax: (619) 229-1109

After Hours Phone: (619) 229-1995

Provider Gender: Female

NPI: 1417117839

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Spanish,

Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262205

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

8860 CENTER DR STE 350

LA MESA, CA 91942

Phone: (619) 286-9480

Fax: (619) 286-4568

After Hours Phone: (619) 286-9480

Provider Gender: Female

NPI: 1841447950

Provider English Spoken: Y

Provider Language(s)

Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Imperial Health Holdings Medical Group-SD

LAKE ELSINORE

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY
 Provider ID: 290293
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951) 252-2720
 Provider Gender: Male
 NPI: 1215008552
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SHARP MEMORIAL HOSPITAL, POMONA VALLEY HOSP MED CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\None
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OPTOMETRIST

GEE, JENNIFER
 Provider ID: 290211
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951) 252-2720
 Provider Gender: Female
 NPI: 1336589332
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CALIFORNIA PACIFIC MEDICAL CENTER - D P APH
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

MORA, WENDY
 Provider ID: 290239
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951) 252-2720
 Provider Gender: Female
 NPI: 1376958389
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

TAM, EMILY
 Provider ID: 290319
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951) 252-2720

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Provider Gender: Female

NPI: 1497161236

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

LAKESIDE

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 257549

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)
390-9975

Provider Gender: Male

NPI: 1306916994

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

PSYCHOLOGIST

BRUNETTO, HEIDI

Provider ID: 290407

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Provider Gender: Female

NPI: 1023250453

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

LOS ANGELES

PSYCHOLOGIST

CALANDRA, JOAN

Provider ID: 289989

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

11911 SAN VICENTE BLVD
STE 280

LOS ANGELES, CA 90049

Phone: (310) 433-7723

After Hours Phone: (310)
433-7723

Provider Gender: Female

NPI: 1730173865

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

MENIFEE

CERTIFIED NURSE

PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306581

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

26926 CHERRY HILLS
BLVD STE B

MENIFEE, CA 92586

Phone: (951) 216-2200

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D. دليل مقدمي الخدمات المتخصصين

Fax: (858) 633-4699

After Hours Phone: (951)
216-2200

Provider Gender: Female

NPI: 1093474090

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272954

Board Certified Specialty: No
UCSD MEDICAL GROUP

30420 HAUN RD
MENIFEE, CA 92584

Phone: (951) 676-4193

After Hours Phone: (951)
676-4193

Provider Gender: Female

NPI: 1841771664

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

MORENO VALLEY

OPTOMETRIST

BULLUM, ANTHONY

Provider ID: 290330

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

22675 ALESSANDRO BLVD
MORENO VALLEY, CA
92553

Phone: (951) 571-2350

Fax: (951) 571-2370

After Hours Phone: (951)
571-2350

Provider Gender: Male

NPI: 1992773956

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241738

Board Certified Specialty: No
UCSD MEDICAL GROUP

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287655

Board Certified Specialty: No
UCSD MEDICAL GROUP

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

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D. دليل مقدمي الخدمات المتخصصين

Fax: (951) 677-9757

☎ After Hours Phone: (951) 696-6000

Provider Gender: Male

NPI: 1417243239

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CARDIAC

ELECTROPHYSIOLOGY

HAN, FREDERICK

Provider ID: 210100

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427255967

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268658

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

☎ Phone: (951) 600-1640

Fax: (951) 600-1760

☎ After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1699078923

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300259

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 25170 HANCOCK AVE STE
200

MURRIETA, CA 92562

☎ Phone: (951) 461-9300

Fax: (951) 461-9399

☎ After Hours Phone: (951) 461-9300

Provider Gender: Female

NPI: 1144539842

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N


♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 8:30AM-0PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.








D. دليل مقدمي الخدمات المتخصصين

M-F 8AM-5PM
SA 8:30AM-0PM

 Website: N/A
IPA: Rady Childrens Health
Network







CERTIFIED NURSE PRACTITIONER

SNYDER, MICHELLE

Provider ID: 210676
Board Certified Specialty: No
UCSD MEDICAL GROUP
 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1851561054
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA








Provider ID: 210794
Board Certified Specialty: No
UCSD MEDICAL GROUP
 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346696044
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

SYED-UDDIN, SUMIYAH



Provider ID: 297771
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124
Fax: (951) 696-6293
 After Hours Phone: (951)
696-6124
Provider Gender: Female
NPI: 1225606478
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Urdu
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255941
Board Certified Specialty: No
UCSD MEDICAL GROUP
 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6000

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (951) 696-6000

Provider Gender: Female

NPI: 1619014479

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 210826

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 41011 CALIFORNIA OAKS

RD STE 104

MURRIETA, CA 92562

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1093791014

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

CHEN, KENNETH

Provider ID: 283132

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 25500 MEDICAL CENTER

DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6000

Fax: (951) 677-9757

☎ After Hours Phone: (951) 696-6000

Provider Gender: Male

NPI: 1720472657

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PATEL, SAGAR

Provider ID: 283001

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 25500 MEDICAL CENTER

DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6000

Fax: (951) 677-9757

☎ After Hours Phone: (951) 696-6000

Provider Gender: Male

NPI: 1245672302

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None


American Sign Language (ASL):

N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE


TRAN, LINH


Provider ID: 202659

Board Certified Specialty: No
UCSD MEDICAL GROUP

 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

 Phone: (951) 696-6000

 After Hours Phone: (951) 696-6000

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE


TRAN, LINH

Provider ID: 210573


Board Certified Specialty: No
UCSD MEDICAL GROUP

 41011 CALIFORNIA OAKS RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY


AL KHIAMI, BELAL

Provider ID: 275994

Board Certified Specialty: No
UCSD MEDICAL GROUP

 28062 BAXTER RD

MURRIETA, CA 92563


 Phone: (951) 290-4000

Fax: (888) 539-8781

 After Hours Phone: (951) 290-4000

Provider Gender: Male

NPI: 1861623506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER,
LOMA LINDA UNIVERSITY

MED CTR MURRIETA,
TEMECULA VALLEY HOSPITAL

INC

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

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D. دليل مقدمي الخدمات المتخصصين

WETTERSTEN, NICHOLAS

Provider ID: 210605

Board Certified Specialty: No
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1063701068

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)

Spoken: Hungarian,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

DR

MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)

Spoken: Hungarian,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296988

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296992

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294649

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25500 MEDICAL CENTER

25170 HANCOCK AVE FL 1

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D. دليل مقدمي الخدمات المتخصصين

MURRIETA, CA 92562
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294652
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 25500 MEDICAL CENTER DR
MURRIETA, CA 92562
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710

Provider Gender: Female
NPI: 1801207634
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301820
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 25500 MEDICAL CENTER DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6000
Fax: (951) 696-6105
🕒 After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1003260951
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE





WEISS, KATHERINE
Provider ID: 264676
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
📍 25500 MEDICAL CENTER DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6000
Fax: (951) 696-6105
🕒 After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1053541862
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN




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D. دليل مقدمي الخدمات المتخصصين








DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 297071
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6000
Fax: (951) 696-6105
 After Hours Phone: (951)
696-6000
Provider Gender: Female
NPI: 1811151848
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N







 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 283334
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1568773984
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

JINDAL, ANUJA
Provider ID: 215521
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1194046581
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

NEUROLOGY

SAHAGIAN, MICHELLE
Provider ID: 283166

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

GOLD, JEFFREY

Provider ID: 215691

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)

600-1640

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 215442

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1528353521

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

KIMMCMANUS, OLIVIA

Provider ID: 215666

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1174870067

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA

Provider ID: 273227


Board Certified Specialty: No
UCSD MEDICAL GROUP

 25405 HANCOCK AVE STE 217

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 215606

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 25170 HANCOCK AVE MURRIETA, CA 92562


 Phone: (951) 600-1640

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT

HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267317

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL


CTR, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

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D. دليل مقدمي الخدمات المتخصصين

Network

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297010

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 215687

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216415

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 309-7702

After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 215685

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1235287947
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 215684
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
☎ Fax: (951) 600-1760
🕒 After Hours Phone: (951) 600-1640

Provider Gender: Female
NPI: 1760707657

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 215332
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951) 600-1640

Provider Gender: Female
NPI: 1154492916

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244898
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1400
🕒 After Hours Phone: (951) 600-1400

Provider Gender: Female
NPI: 1952740177

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

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JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE

MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)

600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297034

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1508250747
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN
Provider ID: 215733
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1205128089
☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD
CHILDRENS HOSP, Stanford
Health Care, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO
Provider ID: 284119
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1114277787
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network


PEDIATRIC CARDIOLOGY


DAVIS, CHRISTOPHER
Provider ID: 215743
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1760691950
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

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N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY


DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY


MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


NARAYAN, HARI


Provider ID: 239114

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY


SILVASEPULVEDA, JOSE

Provider ID: 215679

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640


 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1417222472


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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC CARDIOLOGY


WILLIAMS, MATTHEW

Provider ID: 215678

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1831423250


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

 25500 MEDICAL CENTER
DR


MURRIETA, CA 92562

 Phone: (951) 696-6124

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1366622078


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY MEDICINE


DO, STEPHANIE

Provider ID: 216969


Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562


 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1750513644

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin
Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

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MEDICINE

GROSS, MATTHEW

Provider ID: 297173
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 25170 HANCOCK AVE FL 1
 MURRIETA, CA 92562
 Phone: (858) 966-7800
 Fax: (858) 966-8231
 After Hours Phone: (858) 966-7800
 Provider Gender: Male
 NPI: 1942223664
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

INDRA, SEAN

Provider ID: 302626
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

25500 MEDICAL CENTER DR
 MURRIETA, CA 92562
 Phone: (951) 696-6124
 Fax: (951) 696-6293
 After Hours Phone: (951) 696-6124
 Provider Gender: Male
 NPI: 1427349091
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
 Medi-Cal Open Panel: No
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302318
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 25170 HANCOCK AVE STE 150
 MURRIETA, CA 92562

Phone: (858) 966-7800
 Fax: (858) 966-8231
 After Hours Phone: (858) 966-7800
 Provider Gender: Female
 NPI: 1609495399
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN

Provider ID: 275655
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 25500 MEDICAL CENTER DR
 MURRIETA, CA 92562
 Phone: (951) 696-6161

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (951) 696-6105

☎ After Hours Phone: (951) 696-6161

Provider Gender: Male

NPI: 1528483955

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Gujarati

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID

Provider ID: 302147

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6124

Fax: (951) 696-6293

☎ After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1194145946

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI

Provider ID: 287924

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6124

Fax: (951) 696-6293

☎ After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1265867683

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, LOMA LINDA

UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302353

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6124

Fax: (951) 696-6293

☎ After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1710418744

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST

HEALTHCARE RANCHO

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A




IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE


RANASURIYA, DUNISHA

Provider ID: 216972

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6161
 After Hours Phone: (951)
696-6161

Provider Gender: Female
NPI: 1740468057


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE


SCHROTER, STEPHANIE

Provider ID: 243831

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124
 After Hours Phone: (951)
696-6124


Provider Gender: Female
NPI: 1073951828

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE


SHETH, SARIKA

Provider ID: 248172

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124
Fax: (951) 696-6293
 After Hours Phone: (951)
696-6124

Provider Gender: Female
NPI: 1336503234

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301634

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

 25170 HANCOCK AVE FL 1

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D. دليل مقدمي الخدمات المتخصصين

MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1851540199
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW
Provider ID: 294678
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
Fax: (951) 696-6293
🕒 After Hours Phone: (951)
696-6124

Provider Gender: Male
NPI: 1184071516
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA
Provider ID: 301835
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
Fax: (951) 696-6293
🕒 After Hours Phone: (951)
696-6124
Provider Gender: Female
NPI: 1417496985
🗉 Provider English Spoken: Y
🗉 Provider Language(s)
Spoken: Spanish,

Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

VEGA, CAROLINA
Provider ID: 309972
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6161
Fax: (951) 696-6293
🕒 After Hours Phone: (951)
696-6161
Provider Gender: Female
NPI: 1427442086
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

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CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA

Provider ID: 302819

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1841721172

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301640

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562

 Phone: (951) 600-1640


Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294382

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1144615659

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 215528
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640
Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female
NPI: 1649222340

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

LOPEZ, XIMENA

Provider ID: 302857

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1

MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1740316405

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI

Provider ID: 302112

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1508910787

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF

MEDICAL CENTER, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

PATTERSON, MARY

Provider ID: 215677

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1912112020

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

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D. دليل مقدمي الخدمات المتخصصين

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRICS


VARGASTRUJILLO, MARCELA

Provider ID: 215602

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1952534091

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY


Provider ID: 215644

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1457664518

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN

Provider ID: 283113

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1366589640


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA

Provider ID: 215665

Board Certified Specialty: No

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RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1609017532

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275662

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1

MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 283086

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1336356203

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 215522

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ANWAR, YASMIN


Provider ID: 300845

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

 25495 MEDICAL CENTER DR STE 200

MURRIETA, CA 92562

 Phone: (951) 304-7546


Fax: (951) 696-5872

 After Hours Phone: (951) 304-7546

Provider Gender: Female

NPI: 1588602247

 Provider English Spoken: Y

 Provider Language(s) Spoken: Persian, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT


RODRIGUES, ANNETTE

Provider ID: 302453

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300014

Board Certified Specialty: No

UCSD MEDICAL GROUP

 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1750745394

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES

SURI, RAJAT


Provider ID: 283350

Board Certified Specialty: No

UCSD MEDICAL GROUP

 25500 MEDICAL CENTER DR

MURRIETA, CA 92562


 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951) 677-1111

Provider Gender: Male

NPI: 1144615337

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

FAIRBANKS, TIMOTHY
Provider ID: 246979
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1407010556
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

SURGERY GENERAL

KLING, KAREN
Provider ID: 215583
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1982775144
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

SURGERY GENERAL

VASCULAR

HOWE, STEVEN
Provider ID: 206761
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 28062 BAXTER RD
MURRIETA, CA 92563
☎ Phone: (877) 558-6248
🕒 After Hours Phone: (877)
558-6248
Provider Gender: Male
NPI: 1497702740
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHENG, YU-TSUN

Provider ID: 301902
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1992982854
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 283160
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1548417652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 215420
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1598979593
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

HOWE, STEVEN

Provider ID: 210169
Board Certified Specialty: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1497702740
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS

Provider ID: 210577
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562
☎ Phone: (858) 657-7777
Fax: (888) 539-8781
📞 After Hours Phone: (858)
657-7777
Provider Gender: Male
NPI: 1871752956
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, ISIS

Provider ID: 302115
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-1945
Fax: (619) 475-5048
📞 After Hours Phone: (619)
470-1945
Provider Gender: Female
NPI: 1770124927
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

DE CASTRO, SHARLENE JOYCE

Provider ID: 299158
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (619) 339-5657
📞 After Hours Phone: (844)
200-2426
Provider Gender: Female
NPI: 1750019824
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH 8AM-6PM
F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
Provider ID: 301774

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

340 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL): IPA: IHP of Southern Cal-PHP

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301775

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1428 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1801557947

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 294308

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

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CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303827

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2835 HIGHLAND AVE STE B
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 477-2628

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303830

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 477-1286

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 297836

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-4008

After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1124486865

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: Community Care IPA LLC,
UCSD Medical Group

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291548

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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N

 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: Community Care IPA LLC



DERMATOLOGY

LIN, SHINKO

Provider ID: 308216
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

 655 EUCLID AVE STE 304
 NATIONAL CITY, CA 91950
 **Phone: (619) 267-8303**
Fax: (619) 267-4835
 **After Hours Phone: (619) 267-8303**

Provider Gender: Female
NPI: 1205130036

 **Provider English Spoken: Y**
 **Provider Language(s) Spoken: Spanish**

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8:30AM-4:30PM**

 **Website: N/A**

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP


DERMATOLOGY

LIN, SHINKO

Provider ID: 306319

Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP


 655 EUCLID AVE STE 304
 NATIONAL CITY, CA 91950

 **Phone: (619) 267-8303**
Fax: (619) 267-4835

 **After Hours Phone: (619) 267-8303**

Provider Gender: Female

NPI: 1205130036

 **Provider English Spoken: Y**

 **Provider Language(s) Spoken: Spanish**

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8:30AM-4:30PM**

 **Website: N/A**

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


FAMILY PRACTICE

NAVARRO, VANESSAMARIA

Provider ID: 301784

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP


 2400 E 8TH ST
 NATIONAL CITY, CA 91950


 **Phone: (619) 662-4100**
Fax: (619) 259-2807

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

Provider Gender: Female

NPI: 1952563421

 **Provider English Spoken: Y**

 **Provider Language(s) Spoken: Filipino, Spanish, Tagalog**

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 301278

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1136 D AVE
 NATIONAL CITY, CA 91950

 **Phone: (619) 662-4100**
Fax: (619) 336-2323

 **After Hours Phone: (619)**

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D. دليل مقدمي الخدمات المتخصصين

662-4100
Provider Gender: Female
NPI: 1023278314
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN
Provider ID: 290137
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950
☎ Phone: (619) 474-2233
Fax: (619) 474-2211
🕒 After Hours Phone: (619)
474-2233
Provider Gender: Male
NPI: 1699759936
☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN
Provider ID: 269129
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 1615 SWEETWATER RD
NATIONAL CITY, CA 91950
☎ Phone: (619) 474-2233
Fax: (619) 474-2211
🕒 After Hours Phone: (619)
474-2233
Provider Gender: Male
NPI: 1699759936
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-6PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN
Provider ID: 35045
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
📍 1615 SWEETWATER RD
NATIONAL CITY, CA 91950
☎ Phone: (619) 474-2233
Fax: (619) 474-2211
🕒 After Hours Phone: (619)
474-2233
Provider Gender: Male
NPI: 1699759936
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

INTERVENTIONAL CARDIOLOGY


DAMANI, SAMIR

Provider ID: 303098

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

 Phone: (858) 800-2480

Fax: (858) 216-1908

 After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY


PANDHI, JAY

Provider ID: 269087

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

 Phone: (619) 512-1915

Fax: (619) 512-1913

 After Hours Phone: (619)
512-1915

Provider Gender: Male

NPI: 1407997406

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY


ROUGH, STEVEN

Provider ID: 302044

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302043
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 1415 E 8TH ST STE 6
 NATIONAL CITY, CA 91950
 Phone: (619) 434-4288
 Fax: (619) 434-4315
 After Hours Phone: (619)
 434-4288
 Provider Gender: Male
 NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP,
 Imperial Health Holdings
 Medical Group-SD

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 301320
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1415 E 8TH ST STE 6
 NATIONAL CITY, CA 91950
 Phone: (619) 434-4288
 Fax: (619) 434-4315
 After Hours Phone: (619)
 434-4288
 Provider Gender: Male
 NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP,
 Imperial Health Holdings
 Medical Group-SD

NEPHROLOGY

COMUNALE, RODERICK

Provider ID: 290784
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

502 EUCLID AVE STE 205
 NATIONAL CITY, CA 91950
 Phone: (858) 551-0276
 Fax: (858) 454-8796
 After Hours Phone: (858)
 551-0276
 Provider Gender: Male
 NPI: 1568462109
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, PARADISE
 VALLEY HOSPITAL,
 ALVARADO HOSPITAL LLC,
 SCRIPPS MERCY HOSPITAL,
 KINDRED HOSPITAL SAN
 DIEGO, SELECT SPECIALTY
 HOSPITAL SAN DIEGO,
 SELECT SPECIALTY HOSPITAL
 SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 21\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 301797

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 269247

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC,

Rady Childrens Health

Network

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 257478

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

502 EUCLID AVE STE 300

NATIONAL CITY, CA 91950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC,

Rady Childrens Health

Network

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 206092

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

502 EUCLID AVE STE 300

NATIONAL CITY, CA 91950

Phone: (619) 475-1261

Fax: (619) 475-1267

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (619) 475-1261

Provider Gender: Female

NPI: 1255643474

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC,

Rady Childrens Health

Network

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 302451

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

☎ After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1811162456

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269113

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

☎ After Hours Phone: (800) 898-2020

Provider Gender: Male

NPI: 1427029628

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPTOMETRIST

AOTO, KIM

Provider ID: 268722

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 2240 E PLAZA BLVD STE
F-G

NATIONAL CITY, CA 91950

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

☎ After Hours Phone: (800) 898-2020

Provider Gender: Female

NPI: 1780935650

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM




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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST


KOO, ANITA

Provider ID: 307171
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 474-2284
Fax: (619) 474-3919
 After Hours Phone: (619)
474-2284

Provider Gender: Female
NPI: 1669825667
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM


 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

KOO, ANITA

Provider ID: 307113
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 474-2284

Fax: (619) 474-3919

 After Hours Phone: (619)
474-2284

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 304538
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 306903
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

PODIATRIST

ATMAR, AKMAL

Provider ID: 269784

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

Phone: (929) 287-4511

Fax: (877) 671-6835

After Hours Phone: (929)
287-4511

Provider Gender: Male

NPI: 1558656637

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian, Urdu

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

PODIATRIST

CAINE, SAMUEL

Provider ID: 308212

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 292-2493

Fax: (619) 618-0222

After Hours Phone: (619)
292-2493

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL

Provider ID: 308637

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 292-2493

Fax: (619) 618-0222

After Hours Phone: (619)
292-2493

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

DAVIDSONIII, JOHN

Provider ID: 129542

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

Provider Gender: Male

NPI: 1689069874

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D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-4:30PM
 Website: N/A
 IPA: Community Care IPA LLC

PULMONARY DISEASES

LIM, ROSEMARIE

Provider ID: 262224
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 610 EUCLID AVE STE 202 NATIONAL CITY, CA 91950
 Phone: (619) 472-4900
 Fax: (619) 472-4910
 After Hours Phone: (619) 472-4900
 Provider Gender: Female
 NPI: 1841303419
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog

Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-4:30PM
 Website: N/A
 IPA: Imperial Health Holdings Medical Group-SD

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304531
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3400 E 8TH ST STE 108 NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 695-0050
 After Hours Phone: (619) 482-3000
 Provider Gender: Male
 NPI: 1336894724
 Provider English Spoken: Y

Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 7AM-7PM F 7AM-5PM SA 8AM-1PM
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST



JIMENEZ, ANDREA

Provider ID: 299888
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3400 E 8TH ST STE 108 NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
 Provider Gender: Female
 NPI: 1407440670
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 7AM-7PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI


Provider ID: 287102
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
Fax: (619) 482-3001


 After Hours Phone: (619)
482-3000


Provider Gender: Female
NPI: 1699357525

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-6PM

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305011


Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000
Fax: (619) 695-0050


 After Hours Phone: (619)
482-3000


Provider Gender: Female
NPI: 1457136269

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-4PM

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305012

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP


 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000
Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Female


NPI: 1457136269


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-4PM

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301996


Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000
Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male
NPI: 1447723937



 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286784
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
Fax: (619) 695-0050
 After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1447723937
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301110
Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950


 Phone: (619) 482-3000


Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7AM-7PM

TU 7AM-0PM

W-TH 7AM-7PM

F 7AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301430
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000


Fax: (619) 482-3001

 After Hours Phone: (619)

482-3000

Provider Gender: Female

NPI: 1083353650

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298366
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

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PROVIDER

🕒 Hours: M-F 7AM-7PM
 🌐 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301533
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 📍 3400 E 8TH ST STE 108
 NATIONAL CITY, CA 91950
 📞 Phone: (619) 482-3000
 Fax: (619) 695-0050
 🕒 After Hours Phone: (619)
 482-3000

Provider Gender: Male

NPI: 1063046878

🗒 Provider English Spoken: Y
 🗒 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 7AM-7PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308111
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 📍 2125 S EL CAMINO REAL
 STE 103
 OCEANSIDE, CA 92054
 📞 Phone: (760) 610-0522
 Fax: (760) 610-0523

🕒 After Hours Phone: (760)
 610-0522

Provider Gender: Male

NPI: 1205949914

🗒 Provider English Spoken: Y

🗒 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP
 AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308400

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

📍 2125 S EL CAMINO REAL
 STE 103
 OCEANSIDE, CA 92054

📞 Phone: (760) 610-0522

Fax: (760) 610-0523

🕒 After Hours Phone: (760)
 610-0522

Provider Gender: Male

NPI: 1205949914

🗒 Provider English Spoken: Y

🗒 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP
 AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299882

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

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D. دليل مقدمي الخدمات المتخصصين

3231 WARING CT STE K
OCEANSIDE, CA 92056
Phone: (760) 607-5350
After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 308047

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3988 VISTA WAY STE G
OCEANSIDE, CA 92056

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

APRIL, MONIQUE

Provider ID: 306979

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

APRIL, MONIQUE

Provider ID: 306978

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE

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D. دليل مقدمي الخدمات المتخصصين

PRACTITIONER

BALDWIN, ANDREA

Provider ID: 294937

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497202121

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM

W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 303861

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

SA 8AM-4:30PM

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301313

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM

F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301314

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM

F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301315
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303930

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303931

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 307299

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CISZEK, ALEXANDRA

Provider ID: 306002

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

605 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578220612

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY

Provider ID: 301304

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1326052457

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

Provider ID: 268660

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304494

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304495

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302298

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302300

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302299

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

HUERTA, STEVEN

Provider ID: 307934

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

Provider ID: 307935

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

Provider ID: 307932

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298084

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health

Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298081

Board Certified Specialty: No

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دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298082

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

LANG, LESLIE

Provider ID: 308045

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457366130

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295285

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM
W 10AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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CERTIFIED NURSE PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295286

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL): N
IPA: IHP of Southern Cal-PHP

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295287

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL): N
IPA: IHP of Southern Cal-PHP

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PRITZKER, JOELY

Provider ID: 239772

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

RAYTA, NICOLE

Provider ID: 304682

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1689027542

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 297730

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1000

Fax: (760) 547-1021

📞 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1548987985

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N
IPA: Community Care IPA LLC

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA

Provider ID: 242607

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619488731

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295505

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-2PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295503

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Rady Childrens Health
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-2PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295506

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-2PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,

Network

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 290312

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767
Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801134275

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

PERLMAN, TAMARA

Provider ID: 290733

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1730274374

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

ANDREWS, BRAD

Provider ID: 290542

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 619 CROUCH ST
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1750791745

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

JU, NATHANIEL


Provider ID: 290221

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s) Spoken: Chinese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

DERMATOLOGY

BROWN, REGINA


Provider ID: 309981

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3629 VISTA WAY

OCEANSIDE, CA 92056


 Phone: (760) 757-7546

Fax: (760) 828-9138

 After Hours Phone: (760) 757-7546

Provider Gender: Female

NPI: 1801424692

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

 Phone: (760) 547-1000


Fax: (760) 547-1021


 After Hours Phone: (760)

547-1000

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network

FAMILY PRACTICE

SALAMANCA, OMAR


Provider ID: 295469

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 605 CROUCH ST

OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767
























Provider Gender: Male

NPI: 1083000947

 Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: KERN MEDICAL CENTER</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 14\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM SA 8AM-4:30PM</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>	<p><i>CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 18\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-TH 8AM-4:30PM</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>	<p><i>Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>
<hr/> <h3><u>GASTROENTEROLOGY</u></h3>		
<p>NOVO, MEGAN <i>Provider ID: 308044</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i>  3923 WARING RD STE A OCEANSIDE, CA 92056  <i>Phone: (760) 724-8782</i> <i>Fax: (760) 842-7801</i>  <i>After Hours Phone: (760) 724-8782</i> <i>Provider Gender: Female</i> <i>NPI: 1770961971</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL</i></p>	<hr/> <h3><u>GYNECOLOGIC ONCOLOGY</u></h3> <p>ESKANDER, RAMEZ <i>Provider ID: 282166</i> <i>Board Certified Specialty: No</i> <i>UCSD MEDICAL GROUP</i>  4002 VISTA WAY OCEANSIDE, CA 92056  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Male</i> <i>NPI: 1144486929</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR,</i></p>	
<hr/> <h3><u>INTERNAL MEDICINE</u></h3>		
<p>SHABANIAN, LEILA <i>Provider ID: 307215</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i>  818 PIER VIEW WAY OCEANSIDE, CA 92054  <i>Phone: (760) 631-5000</i> <i>Fax: (760) 414-3892</i>  <i>After Hours Phone: (760) 631-5000</i> <i>Provider Gender: Female</i> <i>NPI: 1013963073</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s)</i></p>		

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D. دليل مقدمي الخدمات المتخصصين

Spoken: Farsi, French, Persian
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, TRI CITY MEDICAL CTR, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8AM-5PM W 8AM-7PM TH-F 8AM-5PM SA 9AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERNAL MEDICINE

SHABANIAN, LEILA
 Provider ID: 307537
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 NPI: 1013963073
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Farsi, French, Persian
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, TRI CITY MEDICAL CTR, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

MATERNAL AND FETAL MEDICINE

MELBER, DORA
 Provider ID: 296991
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1124413026
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
 Provider ID: 294651
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1801207634
 Provider English Spoken: Y
 Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

MEDICAL CTR, Sharp
 Grossmont Hospital, Sharp
 Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 205437
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056
 Phone: (858) 966-6710
 Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1477563302

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264686

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 255793

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG

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D. دليل مقدمي الخدمات المتخصصين

BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 206230
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

🕒 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992847131

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

NEPHROLOGY

LIU, ANDREW

Provider ID: 301573

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 3300 VISTA WAY
OCEANSIDE, CA 92056

☎ Phone: (760) 967-9900

Fax: (760) 967-6769

🕒 After Hours Phone: (760)
967-9900

Provider Gender: Male

NPI: 1710481866

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW

Provider ID: 305443

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 3300 VISTA WAY STE B
OCEANSIDE, CA 92056

☎ Phone: (760) 967-9900

Fax: (760) 967-6769

🕒 After Hours Phone: (760)
967-9900

Provider Gender: Male

NPI: 1710481866

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


NEPHROLOGY

LIU, ANDREW

Provider ID: 308522

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 3300 VISTA WAY
OCEANSIDE, CA 92056

 Phone: (760) 967-9900

Fax: (760) 967-6769

 After Hours Phone: (760)
967-9900

Provider Gender: Male

NPI: 1710481866

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


NEUROLOGY

JINDAL, ANUJA

Provider ID: 206266

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


NEUROLOGY CHILD

SAHAGIAN, MICHELLE


Provider ID: 206075

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273226

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4002 VISTA WAY
OCEANSIDE, CA 92056

 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174758031

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205619

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (960) 547-1020

Fax: (760) 547-1021

☎ After Hours Phone: (960) 547-1020

Provider Gender: Female

NPI: 1871664631

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267318

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

☎ After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1104237353

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297013

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

☎ After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1699216010

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302868

Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP

 3231 WARING CT STE S
OCEANSIDE, CA 92056

 Phone: (760) 631-6144

Fax: (760) 724-3920

 After Hours Phone: (760)
631-6144

Provider Gender: Male

NPI: 1760845184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205509

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216416

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK



 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OPHTHALMOLOGY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

OHALLORAN, HENRY

Provider ID: 205887

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305308

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3637 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 758-2008

Fax: (760) 758-2004

After Hours Phone: (760)
758-2008

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302871

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3231 WARING CT STE S
OCEANSIDE, CA 92056

Phone: (760) 631-6144

Fax: (760) 724-3920

After Hours Phone: (760)
631-6144

Provider Gender: Male

NPI: 1437689536

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290927

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

GEE, JENNIFER

Provider ID: 290210

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC


MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290904

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-5PM
M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST


KIM, MICHAEL

Provider ID: 290902

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-5PM
M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

MORA, WENDY

Provider ID: 290929

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

MORA, WENDY

Provider ID: 290237

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

RING, ROBERT

Provider ID: 269380

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056


 Phone: (760) 726-9383

Fax: (760) 726-9897

 After Hours Phone: (760)
726-9383

Provider Gender: Male

NPI: 1336228840

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 10AM-7PM
TU-TH 9AM-5PM

F 9AM-0PM

 Website: N/A

IPA: Community Care IPA LLC


OPTOMETRIST

TAM, EMILY


Provider ID: 290318

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

TAM, EMILY

Provider ID: 290317

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N


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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303732

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST


TRAN, JESSICA

Provider ID: 304887

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST


TRAN, JESSICA

Provider ID: 303730

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST


TRAN, JESSICA

Provider ID: 304886

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303731

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL): Network

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206086

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244899

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206111

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1124230909

Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes








Min/Max Age: 0\19

American Sign Language (ASL):
N









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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network








OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 297036
Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 *Phone: (760) 547-1020*
Fax: (760) 547-1021
 *After Hours Phone: (760) 547-1020*
Provider Gender: Male
NPI: 1508250747
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA
Provider ID: 303781
Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 *Phone: (760) 547-1000*
Fax: (760) 547-1021
 *After Hours Phone: (760) 547-1000*
Provider Gender: Female
NPI: 1851927883
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi*
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
 *Website: N/A*
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN
Provider ID: 296537
Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 *Phone: (760) 547-1000*
Fax: (760) 547-1021
 *After Hours Phone: (760) 547-1000*
Provider Gender: Female
NPI: 1700047628
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
 *Website: N/A*
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 275786

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297175

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

Phone: (760) 547-1000
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Male

NPI: 1942223664

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302319

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

547-1000

Provider Gender: Female

NPI: 1609495399

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD

Provider ID: 295456

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Male

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1881695914

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): HOSPITAL

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY

MEDICINE

PARKER, SHERINE

Provider ID: 205787

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

📞 After Hours Phone: (760)

547-1020

Provider Gender: Female

NPI: 1477626513

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE

ADVENTIST MED CTR,

GLENDALE MEMORIAL HOSP

AND HEALTH CTR, TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY

MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206951

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

☎ Phone: (760) 547-1000

Fax: (760) 547-1021

📞 After Hours Phone: (760)

547-1000

Provider Gender: Female

NPI: 1124360565

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY

MEDICINE

RUSSELL, SAMUEL

Provider ID: 301251

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

☎ Phone: (760) 547-1000

Fax: (760) 547-1021

📞 After Hours Phone: (760)

547-1000




Provider Gender: Male



NPI: 1215564265

☐ Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين





Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network

CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network





Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE



VARGAS, JACLYN
Provider ID: 296485
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1619359718
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N




PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205813
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1083840920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

PEDIATRIC EMERGENCY MEDICINE







TODD, SARAH
Provider ID: 302801
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1407299787
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED



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 **Accessibility:** CONTACT PROVIDER
 **Hours:** SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 **Website:** N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY








CHU, CHRISTOPHER

Provider ID: 301642
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 **Phone:** (760) 547-1020
Fax: (760) 547-1021
 **After Hours Phone:** (760) 547-1020
Provider Gender: Male
NPI: 1912369273
 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 **Accessibility:** CONTACT

PROVIDER
 **Hours:** M-F 8AM-5PM
 **Website:** N/A
IPA: Rady Childrens Health Network








PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294643
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 **Phone:** (760) 547-1020
Fax: (760) 547-1021
 **After Hours Phone:** (760) 547-1020
Provider Gender: Female
NPI: 1144615659
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-5PM
 **Website:** N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295852
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 3231 WARING CT STE K
OCEANSIDE, CA 92056
 **Phone:** (760) 607-5350
Fax: (760) 607-5365
 **After Hours Phone:** (760) 607-5350
Provider Gender: Male
NPI: 1407052459
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-5PM
 **Website:** N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275661
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

RAMOS, ELENA

Provider ID: 301307
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1306489570
Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302455
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 305530
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
3231 WARING CT STE K
OCEANSIDE, CA 92056
Phone: (760) 607-5350
Fax: (760) 607-5365
After Hours Phone: (760) 607-5350
Provider Gender: Male
NPI: 1629674858
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

COOK, SHERYL

Provider ID: 304924
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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D. دليل مقدمي الخدمات المتخصصين

619 CROUCH ST STE 100
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1750420816

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 9AM-6:15PM

W 9AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

JENSEN, BRIAN

Provider ID: 290775

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

619 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1518138049

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

KRAPES, MICHAEL

Provider ID: 290097

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1215233028

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL

THERAPIST

FARRAR, COURTNEY

Provider ID: 295874

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

Fax: (760) 607-5365

After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246469

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (858) 966-6789

Fax: (858) 966-8519

After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1659634699


Provider English Spoken: Y

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Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303798

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
 547-1020

Provider Gender: Female

NPI: 1538402441

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260954

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
 547-1020

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

FAIRBANKS, TIMOTHY


Provider ID: 205498

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
 547-1020

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD MEDICAL CTR,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN

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Provider ID: 206129

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PERRIS

CERTIFIED NURSE PRACTITIONER

BLAND, JACELIS

Provider ID: 296767

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1675 N PERRIS BLVD STE
G1

PERRIS, CA 92571

Phone: (760) 736-7676

Fax: (760) 736-6744

After Hours Phone: (760)
736-7676

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

POWAY

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308402

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

15725 POMERADO RD STE
201

POWAY, CA 92064

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308113

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

15725 POMERADO RD STE
201

POWAY, CA 92064

Phone: (760) 610-0522

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D. دليل مقدمي الخدمات المتخصصين

Fax: (760) 610-0523

☎ After Hours Phone: (760) 610-0522

Provider Gender: Male

NPI: 1205949914

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JOHNSON, CHRISTINE

Provider ID: 295458

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 13010 POWAY RD
POWAY, CA 92064

☎ Phone: (858) 218-3000
Fax: (360) 462-2742

☎ After Hours Phone: (858) 218-3000

Provider Gender: Female

NPI: 1295049229

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

WOLFE, AMANDA

Provider ID: 243582

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 15525 POMERADO RD STE
B1
POWAY, CA 92064

☎ Phone: (858) 457-8333

☎ After Hours Phone: (858) 457-8333

Provider Gender: Female

NPI: 1063813475

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Russian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

WRIGHT, KIMBERLY

Provider ID: 256378

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 15611 POMERADO RD STE
400
POWAY, CA 92064

☎ Phone: (858) 675-3200

Fax: (858) 673-1587

☎ After Hours Phone: (858) 675-3200

Provider Gender: Female

NPI: 1811400708

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC

DERMATOLOGY

LIN, SHINKO

Provider ID: 306320

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

15725 POMERADO RD STE
102

POWAY, CA 92064

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO

Provider ID: 308217

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

15725 POMERADO RD STE
102

POWAY, CA 92064

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

FAMILY PRACTICE

FLINN, SCOTT

Provider ID: 270054

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE
400

POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2938

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1184694598

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

FAMILY PRACTICE

NAJAND, SADAF

Provider ID: 270055

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE
400

POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1669769717

Provider English Spoken: Y


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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


FAMILY PRACTICE

WHITE, KERI

Provider ID: 269491

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE
400
POWAY, CA 92064


 Phone: (858) 675-3200

Fax: (858) 613-2938

 After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1295701159

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 269315

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE
400
POWAY, CA 92064

 Phone: (858) 675-3100

Fax: (858) 613-2937

 After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1134357007

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


INTERNAL MEDICINE

THAPER, MOHINDERPAL

Provider ID: 270016

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE
575
POWAY, CA 92064


 Phone: (760) 489-1458


Fax: (760) 489-1246

 After Hours Phone: (760)
489-1458

Provider Gender: Male

NPI: 1295795037

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


INTERVENTIONAL


CARDIOLOGY

BAYAT, HAMED

Provider ID: 269450

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE
400
POWAY, CA 92064

 Phone: (858) 675-3110

Fax: (858) 675-3110

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☎ After Hours Phone: (858) 675-3110
 Provider Gender: Male
 NPI: 1356344196
 ☑ Provider English Spoken: Y
 ☑ Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 9AM-5PM
 🌐 Website: N/A
 IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
 Provider ID: 206164
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

📍 15615 POMERADO RD
 POWAY, CA 92064
 ☎ Phone: (858) 613-4143
 Fax: (858) 613-4539
 ☎ After Hours Phone: (858) 613-4143
 Provider Gender: Male

NPI: 1538388988
 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
 Provider ID: 297072
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 📍 15615 POMERADO RD
 POWAY, CA 92064
 ☎ Phone: (858) 613-4143
 Fax: (858) 613-4539
 ☎ After Hours Phone: (858) 613-4143
 Provider Gender: Female
 NPI: 1811151848
 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

COBB, DAMON
 Provider ID: 206030
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

📍 15706 POMERADO RD STE 110
 POWAY, CA 92064
 ☎ Phone: (858) 485-0130
 Fax: (858) 485-9424
 ☎ After Hours Phone: (858)

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D. دليل مقدمي الخدمات المتخصصين

485-0130
Provider Gender: Male
NPI: 1851435598
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER
 Hours: M-TH 9AM-4:30PM
F 9AM-1PM
 Website: N/A
IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

LOZIER, JEFFREY

Provider ID: 270187
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE
400
POWAY, CA 92064
 Phone: (858) 675-3100
Fax: (858) 618-1523

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1225004450

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

OPTOMETRIST

KIM, MICHELLE

Provider ID: 270014
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE
400
POWAY, CA 92064
 Phone: (858) 675-3140
Fax: (858) 613-2936

After Hours Phone: (858)
675-3140

Provider Gender: Female

NPI: 1457328825

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276715
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE
525
POWAY, CA 92064
 Phone: (858) 485-0050
Fax: (858) 673-5187

After Hours Phone: (858)
485-0050

Provider Gender: Female

NPI: 1215584628

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

PODIATRIST

BRAZIER, SETH

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 306398
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15706 POMERADO RD STE 102
 POWAY, CA 92064
 Phone: (858) 485-1494
 Fax: (858) 485-1515
 After Hours Phone: (858) 485-1494
 Provider Gender: Male
 NPI: 1033554324
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PODIATRIST

HAN, KYOUNG
 Provider ID: 296326

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15706 POMERADO RD STE 102
 POWAY, CA 92064
 Phone: (858) 485-1494
 Fax: (858) 485-1515
 After Hours Phone: (858) 485-1494
 Provider Gender: Female
 NPI: 1083954671
 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese, Korean
 Cultural Competency: N
 Hospital Affiliation: SADDLEBACK MEMORIAL MED CTR, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PODIATRIST

READ, TRENTON
 Provider ID: 296656
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

15706 POMERADO RD STE 102
 POWAY, CA 92064
 Phone: (858) 485-1494
 Fax: (858) 485-1515
 After Hours Phone: (858) 485-1494
 Provider Gender: Male
 NPI: 1952963431
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA
 Provider ID: 290629
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Provider Gender: Female
 NPI: 1710902143

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D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

Min/Max Age: 18\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC

Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

RAO, SOUMYA

Provider ID: 46060
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064
 Phone: (858) 675-3150
 Fax: (858) 924-1775
 After Hours Phone: (858) 675-3150
 Provider Gender: Female
 NPI: 1033388616
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Kannada, Russian, Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
 Medi-Cal Open Panel: Yes

RHEUMATOLOGY

REDDY, SMITHA

Provider ID: 269402
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15725 POMERADO RD STE 117
 POWAY, CA 92064
 Phone: (858) 312-1717
 Fax: (858) 435-0207
 After Hours Phone: (858) 312-1717
 Provider Gender: Female
 NPI: 1750534715
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Kannada, Telugu
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None



SURGERY GENERAL

GROVE, JAY

Provider ID: 305851
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD
 POWAY, CA 92064
 Phone: (858) 675-3100
 Fax: (858) 673-5187
 After Hours Phone: (858) 675-3100
 Provider Gender: Male
 NPI: 1912971334
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

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D. دليل مقدمي الخدمات المتخصصين


 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: Community Care IPA LLC

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 257485
Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

 15611 POMERADO RD STE 400
POWAY, CA 92064


 Phone: (858) 613-8900
Fax: (858) 618-1523

 After Hours Phone: (858) 613-8900

Provider Gender: Male

NPI: 1407803687

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Armenian, Italian,
Spanish, Vietnamese

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT,


Community Care IPA LLC


SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 119552

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE 400
POWAY, CA 92064

 Phone: (858) 613-8900


Fax: (858) 618-1523

 After Hours Phone: (858) 613-8900

Provider Gender: Male

NPI: 1407803687

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Armenian, Italian,
Spanish, Vietnamese


Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A


IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT,
Community Care IPA LLC


SURGERY ORTHOPEDIC

BRIED, JAMES

Provider ID: 269500

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE 525
POWAY, CA 92064


 Phone: (858) 485-0050

Fax: (858) 485-5071

 After Hours Phone: (858) 485-0050

Provider Gender: Male

NPI: 1891809257

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

RAMONA


CERTIFIED NURSE

PRACTITIONER

SALAS, JESSICA

Provider ID: 269344

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 211 13TH ST

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D. دليل مقدمي الخدمات المتخصصين

RAMONA, CA 92065
Phone: (760) 789-5160
Fax: (760) 788-7962
After Hours Phone: (760) 789-5160
Provider Gender: Female
NPI: 1356817431
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

CHIROPRACTOR

JIMENEZ, CLARIBEL
Provider ID: 307942
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1801255484
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

WELLS, TODD
Provider ID: 299118
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065
Phone: (760) 789-5160
Fax: (760) 722-5292
After Hours Phone: (760) 789-5160
Provider Gender: Male
NPI: 1952377806
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

RIVERSIDE

PHYSICIANS ASSISTANT

DUARTE, ZULMA
Provider ID: 295431
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
8856 ARLINGTON AVE
RIVERSIDE, CA 92503
Phone: (951) 710-3970
Fax: (360) 462-5824
After Hours Phone: (951) 710-3970
Provider Gender: Female
NPI: 1245885912
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NJIE, EMADE
Provider ID: 298710
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
8856 ARLINGTON AVE
RIVERSIDE, CA 92503
Phone: (951) 710-3970
Fax: (360) 462-5824
After Hours Phone: (951)

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710-3970
 Provider Gender: Female
 NPI: 1881233229
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

SAN DIEGO

ADOLESCENT MEDICINE

CHELVAKUMAR, GAYATHRI
 Provider ID: 296674
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8110 BIRMINGHAM WAY FL
 2
 SAN DIEGO, CA 92123
 Phone: (858) 966-8493
 Fax: (858) 966-8818
 After Hours Phone: (858)
 966-8493
 Provider Gender: Female
 NPI: 1447473848
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY
 Provider ID: 246311
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (858) 657-8530
 After Hours Phone: (858)
 657-8530
 Provider Gender: Female
 NPI: 1346515442
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

JAMES, CHRISTINE
 Provider ID: 284917
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1144589979
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

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D. دليل مقدمي الخدمات المتخصصين

RIEDL, MARC

Provider ID: 255768

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN STE 230

SAN DIEGO, CA 92122

Phone: (858) 657-5350

After Hours Phone: (858)
657-5350

Provider Gender: Male

NPI: 1285654889

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242303

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1811366644

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300068

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

BRUNO, KELLY

Provider ID: 238903

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

CANO, SARAH

Provider ID: 200959

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1750517306

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS GREEN
HOSPITAL, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310044

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1205966264

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
DAMERON HOSPITAL ASSOC,
DAMERON HOSPITAL ASSOC,
SHARP CHULA VISTA MED
CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,

SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310043

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1205966264

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
DAMERON HOSPITAL ASSOC,
DAMERON HOSPITAL ASSOC,
SHARP CHULA VISTA MED
CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

N

Accessibility: CONTACT
PROVIDER

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 Website: N/A
IPA: UCSD Medical Group


ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239002
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1710373642

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269502
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1609353465


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280468
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1831166560

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SADDLEBACK


MEMORIAL MED CTR, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241735
Board Certified Specialty: Yes
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932527751

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY


MEYER, MEGAN

Provider ID: 239607

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720473044

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY


MILLAR, MELISSA

Provider ID: 201308

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-5754

 After Hours Phone: (619) 543-5754

Provider Gender: Female

NPI: 1417361981

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY


NGUYEN, QUOC SY

Provider ID: 242188

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1871911644

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

OSWALD, JESSICA

Provider ID: 239600

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427315118
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SHAW, SUSANNA
Provider ID: 255316
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1063685477
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SORIA, CLAIRE
Provider ID: 243294
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447516414
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SREJIC, UNA
Provider ID: 206383
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1588723860
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, UCSF Medical
Center At Mission Bay, UCSF
MEDICAL CENTER AT MOUNT
ZION, UCSF MEDICAL
CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SUYDAM, STEVEN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider ID: 286569
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, SHARP CORONADO

HOSP AND HEALTHCARE CTR,

RADY CHILDRENS HOSPITAL

SAN DIEGO, SCRIPPS GREEN

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246749

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699057885

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271682

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003261595

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283689

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781


After Hours Phone: (800)
926-8273




Provider Gender: Male

NPI: 1871912493

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284577
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1801258264

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY




YODER, ANDREA

Provider ID: 272804
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1629463104

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group

ANESTHESIOLOGY

YOUNAN, LAWRENCE

Provider ID: 240870
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1922432475

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group









ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN

Provider ID: 280539
Board Certified Specialty: No
UCSD MEDICAL GROUP





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D. دليل مقدمي الخدمات المتخصصين

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417243239
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL
Provider ID: 243553
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273



Provider Gender: Male
NPI: 1700296514
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 300089
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
 Phone: (619) 325-1161
Fax: (619) 325-1717
 After Hours Phone: (619)
325-1161
Provider Gender: Male
NPI: 1689092470
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 299880
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
 Phone: (619) 325-1161
Fax: (619) 325-1717
 After Hours Phone: (619)
325-1161
Provider Gender: Male
NPI: 1689092470
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes


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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CARDIAC ELECTROPHYSIOLOGY


HAN, FREDERICK

Provider ID: 210099

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427255967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK

Provider ID: 210012

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427255967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE


ALANI, ANAS

Provider ID: 201252


Board Certified Specialty: Yes

UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154633709

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, ARROWHEAD REGIONAL

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR,
RIVERSIDE COUNTY

REGIONAL MED CTR, LAC

RANCHO LOS AMIGOS

NATIONAL REHAB CENTER,

LOS ANGELES COUNTY

HARBOR UCLA MEDICAL

CENTER, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS

Provider ID: 211764

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST FL 3
SAN DIEGO, CA 92103

Phone: (858) 657-8530

Fax: (619) 543-2287

After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1013059286

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS

Provider ID: 211765

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1013059286

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303447

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

292 EUCLID AVE STE 210

SAN DIEGO, CA 92114

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309267

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

412 WASHINGTON ST
SAN DIEGO, CA 92103

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

CARDIOVASCULAR DISEASE


MIZZELL, ANNA


Provider ID: 214020

Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851561021


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CARDIOVASCULAR DISEASE


PHREANER, NICHOLAS

Provider ID: 239946

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023373040

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CARDIOVASCULAR DISEASE

PROHASKA, THOMAS

Provider ID: 299912

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861889644


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE


SHEREV, DIMITRI

Provider ID: 301306

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115



 Phone: (619) 582-4490

Fax: (519) 582-4737

 After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish


Cultural Competency: N


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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SHARP CORONADO
HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE


YEANG, CALVIN


Provider ID: 238822

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (858) 657-8530

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1598011058

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277966


Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 304138

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 277967
Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277968

Board Certified Specialty: No
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304137

Board Certified Specialty: No
UCSD MEDICAL GROUP

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290942

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1659745610

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277699

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304132
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

926-8273

Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277700
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277701
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST


JULIAN, FIDES

Provider ID: 304131


Board Certified Specialty: No

UCSD MEDICAL GROUP

 4910 DIRECTORS PL
SAN DIEGO, CA 92121

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST


LAM, KHANH

Provider ID: 295380


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110


 Phone: (619) 325-1161


Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1649594979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, French,
Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN

Provider ID: 246474


Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 9995 CARMEL MOUNTAIN

RD STE B10-B11

SAN DIEGO, CA 92129


 Phone: (844) 200-2426


Fax: (858) 240-6470

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1396876959

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER


AGUILA, YESENIA

Provider ID: 304624

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1245966092

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

ALSTEEN, STEPHANIE

Provider ID: 291389

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013680982

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

AMOS, MARIA

Provider ID: 291439

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235891953

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

ARVIZU, MARGARITA

Provider ID: 307976

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (619) 474-4008

🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1558058636

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

BAKER, TANYA

Provider ID: 255625

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (858) 534-8019

🕒 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1699184259

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BENARD, ROBERT

Provider ID: 268229

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184027724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, Highland

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BILOTTA, NATALIE


Provider ID: 291418

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144809393

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


BROWN, VICTORIA


Provider ID: 307669

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750033890


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER


BROWN, VICTORIA

Provider ID: 307668

Board Certified Specialty: No
UCSD MEDICAL GROUP

 350 DICKINSON ST
SAN DIEGO, CA 92103

 Phone: (800) 922-6827

 After Hours Phone: (800)
922-6827

Provider Gender: Female

NPI: 1750033890

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
IPA: UCSD Medical Group



CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243718
Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1851749253

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


CERTIFIED NURSE

PRACTITIONER

BUI, ANH

Provider ID: 304273
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*


Fax: (858) 633-4680

 *After Hours Phone: (858) 279-0925*

Provider Gender: Male

NPI: 1184309684

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PROVIDER

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE

PRACTITIONER

BUI, ANH

Provider ID: 304272
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 *Phone: (858) 810-8700*

Fax: (858) 633-4680

 *After Hours Phone: (858) 810-8700*

Provider Gender: Male

NPI: 1184309684

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PROVIDER

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE


PRACTITIONER

CAMARGO-LOWTHERS,

ANGELICA

Provider ID: 295914
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 8010 FROST ST STE 220
SAN DIEGO, CA 92123


 *Phone: (858) 650-5000*

Fax: (858) 636-2903

 *After Hours Phone: (858) 650-5000*

Provider Gender: Female

NPI: 1912982539

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

CERTIFIED NURSE PRACTITIONER

CAMARGO-LOWTHERS, ANGELICA

Provider ID: 307993

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Phone: (858) 640-5000

Fax: (858) 636-2903

After Hours Phone: (858)
640-5000

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,
Imperial Health Holdings

Medical Group-SD

CERTIFIED NURSE PRACTITIONER

CAMARGO-LOWTHERS, ANGELICA

Provider ID: 54944

Board Certified Specialty: No

BALBOA NEPHROLOGY MED
GRP INC

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER

Provider ID: 241031

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHANTALA, ELIZABETH

Provider ID: 291305

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942430442

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHAVEZ, ALEXANDRIA

Provider ID: 243357

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811543622

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHEATHAM, BRITTANY

Provider ID: 291461

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184111684

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286369

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286368

Board Certified Specialty: No
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104173558

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COLEMAN, PAGE

Provider ID: 304288

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

Fax: (858) 633-4682

☎ After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1871365312

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA

Provider ID: 299930

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279835

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279836

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COSINO, ANJELICA

Provider ID: 201309

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295238749

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 253692

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN STE 220

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1679850671

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIS, JANET

Provider ID: 255796

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9250

Fax: (619) 471-9275

After Hours Phone: (619)
471-9250

Provider Gender: Female

NPI: 1164616280

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 300051

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301725

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301726

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247981

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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D. دليل مقدمي الخدمات المتخصصين

DEUTSCH, KAREN

Provider ID: 247980

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DOAN, ANGELA

Provider ID: 291426

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1639638968

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DOAN, ANGELA

Provider ID: 291425

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639638968

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286345

Board Certified Specialty: No
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396085098

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 298968

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92173
Phone: (619) 662-4100
Fax: (619) 758-3384
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1477755684
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN
Provider ID: 269863
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Female
NPI: 1003260894
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ECLARINO, GALELEO
Provider ID: 296764
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1518687748

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

EDNACOT, KARYNNE
Provider ID: 309725
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 100
SAN DIEGO, CA 92123
Phone: (858) 650-5000
Fax: (858) 636-2903
After Hours Phone: (858) 650-5000
Provider Gender: Female
NPI: 1548027964

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

EDNACOT, KARYNNE
Provider ID: 309540
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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D. دليل مقدمي الخدمات المتخصصين

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Phone: (858) 650-5000

Fax: (858) 636-2903

After Hours Phone: (858)
650-5000

Provider Gender: Female

NPI: 1548027964

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA

Provider ID: 278982

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669442182

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA

Provider ID: 287444

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669442182

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

FELD, KEREN

Provider ID: 297672

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1730835083

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

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D. دليل مقدمي الخدمات المتخصصين

FISHER, SLOANE

Provider ID: 301585

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1538807003

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

GARTH, MELISSA

Provider ID: 274053

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GIORGI, ASHLEY

Provider ID: 304877

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1952174203

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299466

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299468

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299467

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 293261

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 293260

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PRACTITIONER

HARKNESS, RUMIKO

Provider ID: 208841

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487785093

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

HAROUSH, GAL

Provider ID: 302475

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)

279-0925

Provider Gender: Female

NPI: 1992461230

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

HART, BECKY

Provider ID: 305337

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)
233-8500

Provider Gender: Female

NPI: 1316626344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268656

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

CERTIFIED NURSE

PRACTITIONER

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HEFNER, ANNA

Provider ID: 308420

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1588913537

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

Provider ID: 299144

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1710632435

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: Community Care IPA LLC

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 284022

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 307208

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

9095 RIO SAN DIEGO DR
STE 300

SAN DIEGO, CA 92108

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)
298-9809

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HOOPER, BONNIE

Provider ID: 275254
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 📍 9339 GENESEE AVE STE 350
 SAN DIEGO, CA 92121
 📞 Phone: (858) 454-4300
 Fax: (858) 454-5088
 📞 After Hours Phone: (858) 454-4300
 Provider Gender: Female
 NPI: 1821062878
 📄 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 295392
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 📞 Phone: (858) 279-0925
 Fax: (858) 633-4680

📞 After Hours Phone: (858) 279-0925

Provider Gender: Female
 NPI: 1114957289

📄 Provider English Spoken: Y
 📄 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes
 Min/Max Age: 14\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-5:30PM
 TU 8:30AM-8:30PM
 W 8:30AM-5:30PM
 TH 8:30AM-8:30PM
 F 8:30AM-5:30PM
 SA 9AM-4PM

🌐 Website: N/A
 IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 295393
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 📞 Phone: (858) 810-8700
 Fax: (858) 633-4680

📞 After Hours Phone: (858) 810-8700

Provider Gender: Female
 NPI: 1114957289

📄 Provider English Spoken: Y
 📄 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes
 Min/Max Age: 14\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-5:30PM
 TU 8:30AM-8:30PM
 W 8:30AM-5:30PM
 TH 8:30AM-8:30PM
 F 8:30AM-5:30PM
 SA 9AM-4PM

🌐 Website: N/A
 IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA

Provider ID: 275563
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396371431

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

KEMP, KATHRINE

Provider ID: 301276

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 645-6405
Fax: (619) 687-1067

After Hours Phone: (619)
645-6405

Provider Gender: Female

NPI: 1316615313

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 293293

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1376840199

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 293294

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1376840199

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302426

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1780334110

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302427

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1780334110

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

LAFORTEZA, JOZELLE

Provider ID: 202666

Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538578307

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301601

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123

Phone: (858) 430-1101

Fax: (858) 429-7929

After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301603

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Phone: (619) 297-4707

Fax: (858) 429-7927

After Hours Phone: (619)
297-4707

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301600

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123

Phone: (858) 430-1101

Fax: (858) 221-5049

After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301597

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

Phone: (858) 485-0554

Fax: (858) 429-7933

After Hours Phone: (858)
485-0554

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307103

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 428-7952

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1760058911

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MANZO, CORINA

Provider ID: 304481

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1669087326

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 293345

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1609101997

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MEDINA, RUBELETA

Provider ID: 296673

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9995 CARMEL MOUNTAIN
RD STE B1011

SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 240-6470

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1881153963

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETTEL MARIE

Provider ID: 303202

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1245652387

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-6PM
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299648

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891061966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299649
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1891061966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299649
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891061966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE
Provider ID: 303829
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1952925851
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303828
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

Fax: (858) 536-8034

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MILLER, EVA

Provider ID: 255833

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9210

After Hours Phone: (619)
471-9210

Provider Gender: Female

NPI: 1043492523

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 201325

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MORAN, TIFFANY

Provider ID: 304275

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1730730649

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MULVEY, CAOILFHIONN
Provider ID: 291419
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1184386864

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NEJATI, FRESHTA
Provider ID: 214112
Board Certified Specialty: No
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD

STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1831598119

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER
Provider ID: 291347
Board Certified Specialty: No
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1336896232

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER
Provider ID: 291346
Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1336896232

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER
Provider ID: 291348

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 286911

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124486865

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 286912

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124486865

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296846

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1016 OUTER RD

SAN DIEGO, CA 92154

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1386378479

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH

Provider ID: 296716

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH

Provider ID: 296715

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PACE, RACHELLE

Provider ID: 309961

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588334973

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAI, SARAH

Provider ID: 276870

Board Certified Specialty: No
UCSD MEDICAL GROUP

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255762167

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE


PRACTITIONER

PATIAG, DANIEL

Provider ID: 293249

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1073169769

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE


PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1073169769

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE


PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286223

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497358915

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE


PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 304162

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497358915

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: UCSD LA

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D. دليل مقدمي الخدمات المتخصصين

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER

PEREZ, ALLYSSA




Provider ID: 286222
Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497358915

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY



THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER

PETTIS, BETH




Provider ID: 286878
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1326638958

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE



PRACTITIONER

RAJAEI, NILOUFAR



Provider ID: 291437
Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1275904047

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RANDLE, CARRIE

Provider ID: 299296
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1558557348

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL
MEDICAL CTR SD RBE, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

RIEGO, SUZANNE

Provider ID: 214477

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

☎ Phone: (858) 292-7200

☎ After Hours Phone: (858)
292-7200

Provider Gender: Female

NPI: 1144453754

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROBERTSON, RACHAEL

Provider ID: 286940

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659912327

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE

Provider ID: 295956

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

Fax: (858) 633-4682

☎ After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1225782022

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305039

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305038

Board Certified Specialty: No
UCSD MEDICAL GROUP

350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305037

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 287763

UCSD MEDICAL GROUP

350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1548683378

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 302559

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250

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D. دليل مقدمي الخدمات المتخصصين

Fax: (858) 633-4681

☎ After Hours Phone: (619) 563-0250

Provider Gender: Female

NPI: 1548683378

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, GROSSMONT

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649934126

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROZO, JOSE

Provider ID: 300037

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1528787132

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 293288

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
Fax: (858) 633-4680

☎ After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1285732586

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 293287

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925
Fax: (858) 633-4680

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1285732586

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 297729

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2905

Fax: (619) 283-1614

☎ After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1548987985

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 297728

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1548987985

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293286

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1619370475

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293285

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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D. دليل مقدمي الخدمات المتخصصين

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 293258
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 293259
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER
SEARS-WILEY, ELIZABETH
Provider ID: 276851
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1215394382
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE
Provider ID: 246423
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1417194358

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
IPA: UCSD Medical Group

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE

Provider ID: 256646

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1417194358

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SENA, TIFFANY

Provider ID: 300229

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

Phone: (619) 297-5437

Fax: (619) 297-4567

After Hours Phone: (619) 297-5437

Provider Gender: Female

NPI: 1710539523

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

SWARTZ, ERIN

Provider ID: 255787

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (858) 657-8530

After Hours Phone: (858) 657-8530

Provider Gender: Female

NPI: 1639571292

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER


TAING, JENNIFER

Provider ID: 201573

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649528357

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER

TALBOT, ADRIANNE

Provider ID: 278183

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST STE 1A
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992048557

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER


TOPPEN, LAURA

Provider ID: 215477

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER


TREJO, ANA

Provider ID: 307672

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

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D. دليل مقدمي الخدمات المتخصصين

PRACTITIONER

TUCKER, LANIKA

Provider ID: 307659

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477325181

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

TUCKER, LANIKA

Provider ID: 307657

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477325181

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

VIBAL-POASTER, MARIA

Provider ID: 205651

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1376046680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299260

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 966-7483

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1831627181

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE

PRACTITIONER

WHITEHURST, UNIQUE

Provider ID: 306075


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female


NPI: 1124800214


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER


WOO, ANDY

Provider ID: 299916

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609450550

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group


CERTIFIED REGISTERED NURSE ANESTHETIST


ALFONSO, ALVIN

Provider ID: 256374

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952653404

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


CERTIFIED REGISTERED NURSE ANESTHETIST


APPLEGET, JOSEPH

Provider ID: 239602

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568980472


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL

Provider ID: 262186

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

 286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

 Phone: (619) 564-8249

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (619) 564-8249

Provider Gender: Male

NPI: 1750366928

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Imperial Health Holdings Medical Group-SD

CERTIFIED REGISTERED NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240763

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1174893358

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 274397

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BILLINGTON, KATHERINE

Provider ID: 262246

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

📍 286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

☎ Phone: (619) 564-8249

☎ After Hours Phone: (619) 564-8249

Provider Gender: Female

NPI: 1962787366

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Imperial Health Holdings Medical Group-SD

CERTIFIED REGISTERED NURSE ANESTHETIST

BOEING, KRISTINA

Provider ID: 274397

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1205134301

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256694

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)

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D. دليل مقدمي الخدمات المتخصصين

926-8273
Provider Gender: Male
NPI: 1023194560
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN
Provider ID: 280552
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1982059044
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KERN
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FERRITER, STACY
Provider ID: 265295
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1780725556
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN
Provider ID: 217365
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1427419944

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA
Provider ID: 299905
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083254205

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291444

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1194134114

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291404

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1487213500

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278003

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982133591

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST







VINCENT, BERLIN

Provider ID: 291454




Board Certified Specialty: No
UCSD MEDICAL GROUP



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.D دليل مقدمي الخدمات المتخصصين

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1144987801
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group






CERTIFIED REGISTERED NURSE MIDWIFE


CHOI, NATHALIE
Provider ID: 301714
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1073241618
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 301715
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1073241618
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Website: N/A
IPA: UCSD Medical Group


CERTIFIED REGISTERED NURSE MIDWIFE

EKHOLM, JANNA
Provider ID: 290584
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female
NPI: 1588977151

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 210018
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1518274919

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210019

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210053

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210052

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE

Provider ID: 210041

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1285667741

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210058

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210055

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (619) 543-7878

After Hours Phone: (619)
543-7878

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210054

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-7878

After Hours Phone: (619)
543-7878

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301047

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1235670977

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301048

Board Certified Specialty: No
UCSD MEDICAL GROUP

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CHIROPRACTOR

BUI, MAI

Provider ID: 295791

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

5354 UNIVERSITY AVE STE
3

SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619)
692-3211

Provider Gender: Female

NPI: 1780901264

Provider English Spoken: Y
 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

CHIROPRACTOR

BUI, MAI

Provider ID: 125052

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

5354 UNIVERSITY AVE STE
3

SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619)
692-3211

Provider Gender: Female

NPI: 1780901264

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Imperial Health Holdings

Medical Group-SD

CHIROPRACTOR

BUI, MAI

Provider ID: 289496

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

10717 CAMINO RUIZ STE 137
SAN DIEGO, CA 92126

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619)
692-3211

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1780901264

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: Community Care IPA LLC

N

Accessibility: CONTACT PROVIDER

Hours: M 9AM-6PM

W 9AM-6PM

F 9AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291547

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291546

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9995 CARMEL MOUNTAIN RD STE D

SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CHIROPRACTOR

LUU, DANIEL

Provider ID: 269883

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4419 EUCLID AVE STE 105 SAN DIEGO, CA 92115

Phone: (619) 287-1235

Fax: (619) 255-6406

After Hours Phone: (619) 287-1235

Provider Gender: Male

NPI: 1225108269

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 10AM-6PM

TU 10AM-2PM

W 10AM-6PM

TH 10AM-2PM

F 10AM-6PM

Website: N/A

IPA: Community Care IPA LLC

CHIROPRACTOR

MONTANE, RUBEN

Provider ID: 309694

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1016 OUTER RD

SAN DIEGO, CA 92154

Phone: (619) 429-3733

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D. دليل مقدمي الخدمات المتخصصين

Fax: (619) 628-5550

☎ After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1346725769

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300848

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

Fax: (858) 633-4681

☎ After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1851320337

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300847

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1851320337

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

DERMATOLOGY

CALAME, ANTOANELLA

Provider ID: 290301

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

☎ Phone: (858) 750-2983

Fax: (858) 750-2984

☎ After Hours Phone: (858)
750-2983

Provider Gender: Female

NPI: 1285817569

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Romanian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, YUMA

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

DERMATOLOGY

DANG, TIMOTHY

Provider ID: 309721

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1518427913

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY

KANNAN, SWATI

Provider ID: 286287

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1508155227

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY

KAUNITZ, GENEVIEVE

Provider ID: 285011

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1053734905

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY

KOZMA, BONITA

Provider ID: 269301

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

☎ Phone: (858) 657-8322

Fax: (888) 539-8781

☎ After Hours Phone: (858) 657-8322

Provider Gender: Female

NPI: 1659654598

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PROVIDENCE SAINT JOHNS HEALTH CENTER, SANTA MONICA UCLA MED CTR, RONALD REAGAN UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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DERMATOLOGY

LIN, SHINKO

Provider ID: 308915

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO

Provider ID: 308736

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

DERMATOLOGY

LIU, YUJIE

Provider ID: 308315

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750944450

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY

SHI, VERONICA

Provider ID: 271713

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

Phone: (858) 657-8322

Fax: (888) 539-8781

After Hours Phone: (858)
657-8322

Provider Gender: Female

NPI: 1366897464

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY

SHI, VERONICA

Provider ID: 286335

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366897464

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY


SINGH, GAURAV

Provider ID: 272612

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184073801

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY


STERN, MARLEIGH

Provider ID: 306888

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710447883

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY


ZUBAIR, RAHEEL

Provider ID: 306520

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

 Phone: (858) 454-4300

Fax: (858) 454-5088

 After Hours Phone: (858)
454-4300

Provider Gender: Male

NPI: 1326493024

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):








N

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D. دليل مقدمي الخدمات المتخصصين








 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

EMERGENCY MEDICINE


AMANN, CHRISTOPHER
 Provider ID: 270913
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1134326895
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, USC KENNETH
 NORRIS JR CANCER
 HOSPITAL, KECK HOSPITAL
 OF USC, USC VERDUGO HILLS
 HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

AUSTIN, ANDREA
 Provider ID: 269291
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1811289093
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, GROSSMONT
 HOSPITAL, Los Angeles
 General Medical Center,
 TEMECULA VALLEY HOSPITAL
 INC
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE

BAGBY, JESSICA
 Provider ID: 271136
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1093161473
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
 Provider ID: 271130
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (855) 535-5864
 Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (855) 535-5864

Provider Gender: Male

NPI: 1801207006

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271132

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801207006

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271129

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE

P2

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801207006

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270333

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1801206354

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270334

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270336

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 301706

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063893063

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 279314

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063893063

Provider English Spoken: Y
Cultural Competency: N




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

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D. دليل مقدمي الخدمات المتخصصين


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE



Provider ID: 287430
Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1427476597



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Mandarin*

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*
 *Website: N/A*


IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE



Provider ID: 287428
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1427476597



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Mandarin*

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*
 *Website: N/A*

IPA: UCSD Medical Group


EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 303036
Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR

SAN DIEGO, CA 92103

 *Phone: (619) 543-7051*
Fax: (619) 543-3115

 *After Hours Phone: (619) 543-7051*

Provider Gender: Male
NPI: 1043590169

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY



THORNTON, RADY

CHILDRENS HOSPITAL SAN
DIEGO, EL CENTRO
REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*
 *Website: N/A*



IPA: UCSD Medical Group

EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239879
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 *Phone: (619) 543-6400*
 *After Hours Phone: (619) 543-6400*


Provider Gender: Male

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL


CENTRO REGIONAL MEDICAL
CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


HERNANDEZ, CRISTINA


Provider ID: 242544

Board Certified Specialty: No

UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


HOGUE, BRENNIA

Provider ID: 301711

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE


HORNBEAK, KIRSTEN

Provider ID: 240022

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205214442

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE


KUTZ, CRAIG

Provider ID: 283845

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1598295925

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 285630

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1396270278

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-8PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 246901

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1366761959

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239797

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (619) 543-6400

☎ After Hours Phone: (619) 543-6400

Provider Gender: Female

NPI: 1871732214

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

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PROVIDER

🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239798
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

📍 16950 VIA TAZON
 SAN DIEGO, CA 92127

📞 Phone: (858) 605-4441
 🕒 After Hours Phone: (858) 605-4441

Provider Gender: Female
 NPI: 1871732214

📄 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, RADY CHILDRENS
 HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N
 IPA: UCSD Medical Group

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: SU 8AM-10PM
 M-F 8AM-5PM
 SA 8AM-10PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285607
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

📍 200 W ARBOR DR
 SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273
 Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1366478372

📄 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304933
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

📍 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105

📞 Phone: (619) 280-2905
 Fax: (619) 283-1614

🕒 After Hours Phone: (619) 280-2905

Provider Gender: Female
 NPI: 1811423072

📄 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese

Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health
 Network

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304937
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

📍 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123

📞 Phone: (858) 966-8800

🕒 After Hours Phone: (858) 966-8800

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1811423072

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network

EMERGENCY MEDICINE

RUDOLF, FRANCES

Provider ID: 240159
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (858) 657-7000
 After Hours Phone: (858)
657-7000

Provider Gender: Female
NPI: 1821487430

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 243441
Board Certified Specialty: No
UCSD MEDICAL GROUP
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1457747883

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

EMERGENCY MEDICINE

SLOANE, CHRISTIAN

Provider ID: 209518
Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1841233145

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI

Provider ID: 240124
Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124280730

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269936

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301708

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)
Spoken: Sinhala, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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ENDOCRINOLOGY METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)
Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (858) 657-7298

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255622

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (619) 543-6500

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932324175

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287779

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

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Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI


Provider ID: 287780


Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI


Provider ID: 287781

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY


METABOLISM DIABETES

NAGELBERG, JODI


Provider ID: 287782

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY


METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA


Provider ID: 256091

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (858) 657-7298

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518163799

 Provider English Spoken: Y

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ENDOCRINOLOGY


METABOLISM DIABETES

TANTISIRA, LALITA


Provider ID: 286323

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Thai

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSYAL ANGELI

Provider ID: 299363

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126


 Phone: (844) 200-2426


Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ENDOCRINOLOGY

METABOLISM DIABETES


VALDEZ, KRYSYAL ANGELI

Provider ID: 299743

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426


Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 301761

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BELL, TRACY

Provider ID: 304813

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1497821318

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BELL, TRACY

Provider ID: 304814

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1497821318

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 296740

Board Certified Specialty: No

UCSD MEDICAL GROUP

10505 SORRENTO VALLEY
RD STE 200

SAN DIEGO, CA 92121

Phone: (858) 793-7860

Fax: (858) 436-1289

After Hours Phone: (858)
793-7860

Provider Gender: Male

NPI: 1215382841

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\99


American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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 Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE


BERNADETT, ALEX

Provider ID: 296739


Board Certified Specialty: No
UCSD MEDICAL GROUP

 6699 ALVARADO RD STE
2100

SAN DIEGO, CA 92120

 Phone: (619) 229-3909

Fax: (619) 229-3902

 After Hours Phone: (619)
229-3909

Provider Gender: Male

NPI: 1215382841

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE


CAMPBELL, BRIANNA

Provider ID: 298950

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE

SAN DIEGO, CA 92114


 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316479892

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


CHEN, ALICE


Provider ID: 207164

Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST


SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE


CHEN, ALICE


Provider ID: 207163

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE
200


SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

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D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE


CHEN, ALICE


Provider ID: 207167

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


FAMILY PRACTICE

DANG, LAUREL

Provider ID: 309605

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396366050

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

HILL, LINDA


Provider ID: 293210

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1467434811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


HILL, LINDA

Provider ID: 293211


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1467434811

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D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

JOHN, TANNER

Provider ID: 303515

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1043707326

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300057

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

Phone: (858) 249-6890

After Hours Phone: (858)
249-6890

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300060

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300059

Board Certified Specialty: No
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300058

Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0505

After Hours Phone: (619)
234-2158

Provider Gender: Male

NPI: 1861637217

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304276

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680


After Hours Phone: (858)
810-8700


Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1275945446

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


PERESS, LILIA

Provider ID: 304277


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1275945446

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


RISSER, JOSEPH

Provider ID: 293217

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


RISSER, JOSEPH

Provider ID: 293216

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

ROSADO, IVAN


Provider ID: 299244

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 316 25TH ST

SAN DIEGO, CA 92102


 Phone: (619) 662-4100

Fax: (619) 238-3807

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1316479603

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Provider ID: 290976

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:30AM-5:30PM
M-F 8:30AM-5:30PM
SA 8:30AM-2:30PM


 Website: N/A


IPA: IHP of Southern Cal-PHP

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD
SAN DIEGO, CA 92154


 Phone: (619) 429-3733


 Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1124288873

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE


VAN PRATT LEVIN, BENJAMIN


Provider ID: 302531

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD
SAN DIEGO, CA 92154


 Phone: (619) 429-3733

 Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1619438330

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


VO, PHULUONG


Provider ID: 303332

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100


 Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1043849177

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N


FAMILY PRACTICE


SCOTT, LAGINA


Provider ID: 302648

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114


 Phone: (619) 662-4100

 Fax: (619) 263-9601

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1558897009

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT


Provider ID: 271539

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 9878 CARMEL MOUNTAIN RD STE B
SAN DIEGO, CA 92129

 Phone: (858) 312-1440

Fax: (760) 788-7983

 After Hours Phone: (858) 312-1440

Provider Gender: Male

NPI: 1104845536

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


FEMALE PELVIC MED AND RECONSTRUCTIVE SURG


LUKACZ, EMILY

Provider ID: 256955

Board Certified Specialty: No
UCSD MEDICAL GROUP



 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1750339446

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG


LUKACZ, EMILY


Provider ID: 256956

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 360


SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1750339446

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272837

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-2347

Fax: (858) 657-7259

 After Hours Phone: (619) 543-2347

Provider Gender: Male

NPI: 1861626814

 Provider English Spoken: Y
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

ANAND, GOBIND


Provider ID: 304187

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861626814

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY


BAUMAN, LAURA

Provider ID: 260041

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1255697850

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


GASTROENTEROLOGY

DAVE, SHRAVAN


Provider ID: 304204

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270450

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE 9
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814




 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):




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N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299951
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1780047597


 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY


HILDRETH, AMBER

Provider ID: 280464

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL
 2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1548521511

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

GASTROENTEROLOGY


KUMAR, SOMA

Provider ID: 205377

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL
 2 SOUTH

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)

966-4003

Provider Gender: Female

NPI: 1356502520

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296066

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 115
 SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619) 266-3332

Provider Gender: Female

NPI: 1770961971

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


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D. دليل مقدمي الخدمات المتخصصين

ENCINITAS, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,
UCSD MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY


POLK, DAVID

Provider ID: 275449

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1427140839

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

GASTROENTEROLOGY

REDDY, JOSEPH


Provider ID: 290034

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

 Phone: (619) 599-4074


Fax: (619) 588-4004

 After Hours Phone: (619)
599-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,


UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

GASTROENTEROLOGY

REDDY, JOSEPH

Provider ID: 27748


Board Certified Specialty: Yes

ADVANCED ENDOSCOPY

CONSULTANTS INC

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120


 Phone: (619) 599-4074


Fax: (619) 588-4004

 After Hours Phone: (619)
599-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

UCSD MEDICAL CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):





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N




 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD

GASTROENTEROLOGY

SHAFFER, KATHERINE



Provider ID: 295712
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 **292 EUCLID AVE STE 115 SAN DIEGO, CA 92114**
 **Phone: (619) 266-3332**
Fax: (619) 266-6006
 **After Hours Phone: (619) 266-3332**
Provider Gender: Female
NPI: 1336405695
 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N


 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

SHAH, SHAILJA




Provider ID: 283896
Board Certified Specialty: No UCSD MEDICAL GROUP
 **200 W ARBOR DR SAN DIEGO, CA 92103**
 **Phone: (800) 926-8273**
Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Female
NPI: 1073803243
 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):


N

 **Accessibility: CONTACT PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: UCSD Medical Group

GASTROENTEROLOGY


SHAH, SHAILJA

Provider ID: 304178
Board Certified Specialty: No UCSD MEDICAL GROUP
 **6655 ALVARADO RD SAN DIEGO, CA 92120**

 **Phone: (800) 926-8273**
Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Female
NPI: 1073803243

 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):



N

 **Accessibility: CONTACT PROVIDER**

 **Website: N/A**
IPA: UCSD Medical Group


GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 304196
Board Certified Specialty: No UCSD MEDICAL GROUP
 **6655 ALVARADO RD SAN DIEGO, CA 92120**
 **Phone: (800) 926-8273**
Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Male
NPI: 1285051177

 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation: UCSD

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 304186


Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 300024

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GENETICS CLINICAL

REIMERS, REBECCA


Provider ID: 294650

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

GENETICS CLINICAL


REIMERS, REBECCA

Provider ID: 302348

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5840

Fax: (858) 966-8550

 After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19	American Sign Language (ASL): N	American Sign Language (ASL): N
American Sign Language (ASL): N	🇺🇸 Accessibility: CONTACT PROVIDER	🇺🇸 Accessibility: CONTACT PROVIDER
🇺🇸 Accessibility: CONTACT PROVIDER	🕒 Hours: M-F 8AM-5PM	🕒 Hours: M-F 8AM-5PM
🕒 Hours: M-F 8AM-5PM	🌐 Website: N/A	🌐 Website: N/A
🌐 Website: N/A	IPA: Rady Childrens Health Network	IPA: Rady Childrens Health Network

GENETICS MEDICAL

DELCAMPOCASANELLES, MIGUEL
 Provider ID: 206013
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 📍 7920 FROST ST STE 200
 SAN DIEGO, CA 92123
 📞 Phone: (858) 966-5840
 📠 Fax: (858) 966-4064
 📞 After Hours Phone: (858) 966-5840
 Provider Gender: Male
 NPI: 1598141475
 🇺🇸 Provider English Spoken: Y
 🇺🇸 Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

GENETICS MEDICAL

NIEMI, ANNA-KAISA
 Provider ID: 307094
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 📍 7920 FROST ST STE 200
 SAN DIEGO, CA 92123
 📞 Phone: (858) 966-5840
 📠 Fax: (858) 966-8550
 📞 After Hours Phone: (858) 966-5840
 Provider Gender: Female
 NPI: 1497941397
 🇺🇸 Provider English Spoken: Y
 🇺🇸 Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
 Provider ID: 268691
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 📍 9340 CLAIREMONT MESA BLVD STE D
 SAN DIEGO, CA 92123
 📞 Phone: (858) 278-9911
 📠 Fax: (858) 565-7324
 📞 After Hours Phone: (858) 278-9911
 Provider Gender: Female
 NPI: 1063558856
 🇺🇸 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 🇺🇸 Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Community Care IPA LLC

HEARING AID DEALER /

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D. دليل مقدمي الخدمات المتخصصين

SUPPLIER

ANDERSON, ELAINE

Provider ID: 268689

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6367 ALVARADO CT STE
101

SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268652

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6367 ALVARADO CT STE
101

SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268653

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858)
278-9911

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303059

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

LEE, KAREN

Provider ID: 284165

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

3010 CHILDRENS WAY FL 2

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1518352970
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY
Provider ID: 301060
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1295153575
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

PAUL, MEGAN
Provider ID: 274499
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY STE 2W
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035

After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1427495894
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEMATOLOGY / ONCOLOGY

VU, PETER
Provider ID: 272716
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

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ZHOU, JENNY

Provider ID: 273188
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE STE 310
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1598007924
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 247583
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273

Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1689633729
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 247585
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 10300 CAMPUS POINT DR
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1689633729
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

HEPATOLOGY


BARMAN, PRANAB

Provider ID: 241953
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 315
 SAN DIEGO, CA 92121
 Phone: (800) 826-5273
 After Hours Phone: (800) 826-5273
 Provider Gender: Male
 NPI: 1023301991


Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPICE AND PALLIATIVE MEDICINE


RUBENZI, TAMARA

Provider ID: 245573

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 276671

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO


CHILDERS, DIANA

Provider ID: 275068

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033128376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

FIRESTEIN, CATHERINE

Provider ID: 275387

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427348382

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

HAMMOND, CHARLES

Provider ID: 278588

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033641816

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

SHINDO, YURI

Provider ID: 284743

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700271939

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HOSPITALIST MD/DO

TONG, ALEXANDER

Provider ID: 300045

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356804926

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290420

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (619) 205-6384

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

BAMFORD, LAURA

Provider ID: 276546

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6382

Fax: (888) 539-8781

☎ After Hours Phone: (619)
543-6382

Provider Gender: Female

NPI: 1750435996

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

DEISS, ROBERT

Provider ID: 258330

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

☎ Phone: (619) 543-3995

☎ After Hours Phone: (619)
543-3995

Provider Gender: Male

NPI: 1194977652

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

HORTON, LUCY

Provider ID: 240887

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427324821

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301058

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538346317

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277225

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Phone: (619) 543-5890

Fax: (888) 539-8781

After Hours Phone: (619)
543-5890

Provider Gender: Male

NPI: 1093193583

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277226

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093193583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

MOODLEY, AMARAN

Provider ID: 208558

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (885) 966-7785

Fax: (858) 966-8658

After Hours Phone: (885)
966-7785

Provider Gender: Male

NPI: 1104023670

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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INFECTIOUS DISEASE

PANNARAJ, PIA

Provider ID: 301026

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-7785

Fax: (858) 966-8658

After Hours Phone: (858) 966-7785

Provider Gender: Female

NPI: 1942478524

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

RAJAGOPAL, AMUTHA

Provider ID: 221088

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 3

SAN DIEGO, CA 92103

Phone: (619) 433-3995

After Hours Phone: (619) 433-3995

Provider Gender: Female

NPI: 1124465745

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA

Provider ID: 299946

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1659720555

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

INFECTIOUS DISEASE

TOVARPADUA, LEIDY

Provider ID: 205357

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-7785

Fax: (858) 966-8658

After Hours Phone: (858) 966-7785

Provider Gender: Female

NPI: 1033491311

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH
MEMORIAL MED CTR


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


INFECTIOUS DISEASE


TOVARPADUA, LEIDY

Provider ID: 265093

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1033491311

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, CHILDRENS HOSP OF

LOS ANGELES, LONG BEACH

MEMORIAL MED CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

INTERNAL MEDICINE


ARUTYUNOV, BORIS


Provider ID: 201910

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 471-9186

 After Hours Phone: (619)
471-9186

Provider Gender: Male

NPI: 1144562703

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN

HOSPITAL, SUTTER MEDICAL

CENTER SACRAMENTO, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE


BALL, SHELDON

Provider ID: 294136


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1689646275


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BALL, SHELDON

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 294137
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1689646275

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273983

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (760) 471-9186

Fax: (619) 543-8255

After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CHENG, GEORGE

Provider ID: 247639

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286668

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286344

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286343

Board Certified Specialty: No
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

HASTIE, ELIZABETH

Provider ID: 291431

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1154818797

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214386

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193

Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY




































THORNTON, UC DAVIS
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

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<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p>INTERNAL MEDICINE</p> <p>KATZ, YISRAEL</p> <p>Provider ID: 272936</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1730507872</p>	<p> Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL):</p>
<p>INTERNAL MEDICINE</p> <p>JABBOUR, MOUSSA</p> <p>Provider ID: 256659</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1255741633</p>	<p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p> Provider Language(s) Spoken: Arabic</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>
<p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Arabic</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL):</p>	<p>INTERNAL MEDICINE</p> <p>KVIATKOVSKY, MILLA</p> <p>Provider ID: 274003</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (619) 543-6222</p> <p> After Hours Phone: (619) 543-6222</p> <p>Provider Gender: Female</p> <p>NPI: 1366855355</p> <p> Provider English Spoken: Y</p>	<p>INTERNAL MEDICINE</p> <p>LAGO HERNANDEZ, CARLOS</p> <p>Provider ID: 238622</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1558756270</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p> Provider English Spoken: Y</p>	<p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274411

Board Certified Specialty: No


UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL


Provider ID: 274410

Board Certified Specialty: No


UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LEVERONE, NICHOLAS

Provider ID: 272692

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1407388564

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE

MAJITHIA, AMIT


Provider ID: 255882


Board Certified Specialty: No

UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273





 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801091459

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D. دليل مقدمي الخدمات المتخصصين




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE




MARTINEZ, ARMANDO
Provider ID: 291421
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598261091
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MUNCE, DANIELLE
Provider ID: 272577
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1740644509

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




INTERNAL MEDICINE

NOKES, BRANDON
Provider ID: 287582
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1487040051

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 273962
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-6222
Fax: (619) 543-8255
 After Hours Phone: (619)
543-6222
Provider Gender: Female
NPI: 1538351408

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH

Provider ID: 309544
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100

Provider Gender: Male
NPI: 1750498119

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: ST MARYS
MEDICAL CENTER SAN
FRANCISCO



Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE




SMITH, CHELSEY

Provider ID: 239920
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (858) 657-6110
 After Hours Phone: (858)
657-6110

Provider Gender: Female
NPI: 1013264506

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



INTERNAL MEDICINE




TANTISIRA, LALITA

Provider ID: 275926
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1508874298

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275927
Board Certified Specialty: No
UCSD MEDICAL GROUP
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1508874298

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Thai

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274469

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033572995

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1053765909

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259535

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730133976

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259534

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121

☎ Phone: (855) 355-5864

Fax: (888) 539-8781

☎ After Hours Phone: (855)

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D. دليل مقدمي الخدمات المتخصصين

355-5864
Provider Gender: Female
NPI: 1730133976
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WEBSTER, LUKE

Provider ID: 272681
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1235660887
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283027
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346636453
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group


INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283026
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346636453
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272657
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN


Provider ID: 276290

Board Certified Specialty: No
UCSD MEDICAL GROUP

 555 WASHINGTON ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093791014

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE


BEGOVIC, ADNAN

Provider ID: 276291

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR STE
3-313

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093791014

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 210825

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1093791014

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BOROK, ZEA

Provider ID: 284705

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800) 926-5273

Provider Gender: Female

NPI: 1750317251

Provider English Spoken: Y
Provider Language(s)

Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, Los
Angeles General Medical

Center, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BOROK, ZEA

Provider ID: 284706

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800) 926-5273

Provider Gender: Female

NPI: 1750317251

Provider English Spoken: Y

Provider Language(s)

Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, Los
Angeles General Medical

Center, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BOROK, ZEA

Provider ID: 284704

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800)

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D. دليل مقدمي الخدمات المتخصصين

926-5273
Provider Gender: Female
NPI: 1750317251
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, Los
Angeles General Medical
Center, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271466
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male

NPI: 1992141428
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271467
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1992141428
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group



INTERNAL MEDICINE CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271469
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1992141428
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

TRAN, LINH

Provider ID: 271939
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1851682728

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY



THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A



IPA: UCSD Medical Group

INTERNAL MEDICINE GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1447351085



 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: MERCY
GENERAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE



Provider ID: 300061
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1457770240

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

KINGDON, TYLER


Provider ID: 301814
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1477084283

 Provider English Spoken: Y


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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSPITAL OF
ORANGE COUNTY, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309250

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100


Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114


 Phone: (619) 616-2100


Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY


SHEREV, DIMITRI

Provider ID: 302987

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 6402 EL CAJON BLVD STE
102

SAN DIEGO, CA 92115


 Phone: (619) 582-4490


Fax: (619) 582-4737

 After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, ALVARADO

HOSPITAL LLC, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, Sharp Grossmont

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D. دليل مقدمي الخدمات المتخصصين

Hospital, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 309096

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296050

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital, SHARP
CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI


Provider ID: 295844

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

LICENSED PROFESSIONAL CLINICAL COUNSELOR









GARCIA, JENNI

Provider ID: 299310





Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP



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D. دليل مقدمي الخدمات المتخصصين






 3025 BEYER BLVD
SAN DIEGO, CA 92154
 Phone: (619) 662-4100
Fax: (619) 662-4119
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 143775863
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP




LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY
Provider ID: 239584
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE
315
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
 After Hours Phone: (858)
534-8019
Provider Gender: Female
NPI: 1356846349
 Provider English Spoken: Y
Cultural Competency: N








Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA
Provider ID: 272670
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1992149447
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA
Provider ID: 277179
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1992149447
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين


 Website: N/A
IPA: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI


Provider ID: 300011
Board Certified Specialty: No
UCSD MEDICAL GROUP


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group


MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI


Provider ID: 300012
Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI


Provider ID: 300010
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group


MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE

Provider ID: 208640
Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1770532707


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N












 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A
IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<u>MATERNAL AND FETAL MEDICINE</u>	<u>MATERNAL AND FETAL MEDICINE</u>	<u>MEDICINE</u>
<p>MCCULLOUGH, DEIRDRE <i>Provider ID: 277260</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK  3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-6710</i> <i>Fax: (858) 966-6711</i>  <i>After Hours Phone: (858) 966-6710</i> <i>Provider Gender: Female</i> <i>NPI: 1639153018</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p>MCCULLOUGH, DEIRDRE <i>Provider ID: 210034</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK  3003 HEALTH CENTER DR SAN DIEGO, CA 92123  <i>Phone: (858) 966-6710</i> <i>Fax: (858) 939-4102</i>  <i>After Hours Phone: (858) 966-6710</i> <i>Provider Gender: Female</i> <i>NPI: 1639153018</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p>MELBER, DORA <i>Provider ID: 296994</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK  3003 HEALTH CENTER DR SAN DIEGO, CA 92123  <i>Phone: (858) 966-6710</i> <i>Fax: (858) 939-4102</i>  <i>After Hours Phone: (858) 966-6710</i> <i>Provider Gender: Female</i> <i>NPI: 1124413026</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Hungarian, Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network, UCSD Medical Group</i></p>
	<u>MATERNAL AND FETAL</u>	<u>MATERNAL AND FETAL MEDICINE</u>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

MELBER, DORA

Provider ID: 296990
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

Provider ID: 296998
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 220
 SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208644
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296989
 Board Certified Specialty: No

MATERNAL AND FETAL MEDICINE

MELBER, DORA

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D. دليل مقدمي الخدمات المتخصصين

4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208643

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294648

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294647

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 214436

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277314

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

Provider ID: 277304

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1477563302

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A






















IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

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D. دليل مقدمي الخدمات المتخصصين

MATERNAL AND FETAL MEDICINE	<i>IPA: Rady Childrens Health Network</i>	MEDICINE
<p>SCHWENDEMANN, WADE <i>Provider ID: 277307</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK  3003 HEALTH CENTER DR SAN DIEGO, CA 92123  <i>Phone: (858) 966-6710</i> <i>Fax: (858) 939-4102</i>  <i>After Hours Phone: (858) 966-6710</i> <i>Provider Gender: Male</i> <i>NPI: 1477563302</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i></p>	<p>MATERNAL AND FETAL MEDICINE</p> <p>SHANNON, KELLI <i>Provider ID: 208474</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK  3003 HEALTH CENTER DR SAN DIEGO, CA 92123  <i>Phone: (858) 966-6710</i> <i>Fax: (858) 966-6711</i>  <i>After Hours Phone: (858) 966-6710</i> <i>Provider Gender: Female</i> <i>NPI: 1922156397</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p> <p>MATERNAL AND FETAL</p>	<p>WESTERMANN, MELISSA <i>Provider ID: 242522</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK  3003 HEALTH CENTER DR SAN DIEGO, CA 92123  <i>Phone: (858) 966-6710</i> <i>Fax: (858) 939-4102</i>  <i>After Hours Phone: (858) 966-6710</i> <i>Provider Gender: Female</i> <i>NPI: 1760730758</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i></p>

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 277353

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 287084

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277383

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1992847131

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY

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D. دليل مقدمي الخدمات المتخصصين


MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277387

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992847131

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,

SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY


MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,


CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE


WOLF, RICHARD


Provider ID: 209253

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283285

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

 After Hours Phone: (858)
966-5818

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1528454188

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE

Provider ID: 205727

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

Fax: (858) 966-7483

📞 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1386928224

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

DELROSARIO, PAMELA

Provider ID: 295000

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

📞 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1952691941

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205645

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 4077 5TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 260-7046

Fax: (619) 686-3843

📞 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1679809826

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Network

NEONATAL / PERINATAL MEDICINE

GLENN, TARA

Provider ID: 283159

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1992060974

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294251

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1245617489

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE

Provider ID: 205941

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL

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D. دليل مقدمي الخدمات المتخصصين

MEDICINE

HONOLD, JOSE

Provider ID: 242881

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 691-7000

After Hours Phone: (619)
691-7000

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, EL CENTRO

REGIONAL MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

LANE, BRIAN

Provider ID: 205707

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1427129287

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL

HOSPITAL, SHARP CHULA
VISTA MED CTR, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 205630

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1003028416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

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D. دليل مقدمي الخدمات المتخصصين

SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group


THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE


Provider ID: 206206

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (619) 543-3812

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY

NEONATAL / PERINATAL MEDICINE


MARC-AURELE, KRISHELLE

Provider ID: 206210

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-8022

Fax: (858) 966-8457

 After Hours Phone: (858)
966-8022

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206208

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

MATоба, NANA

Provider ID: 299894
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 966-7483
After Hours Phone: (858)
966-5888
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s)
Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

MATоба, NANA

Provider ID: 297974
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858)
966-5888
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s)
Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

MATоба, NANA

Provider ID: 297975
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 260-7046
Fax: (619) 686-3843
After Hours Phone: (619)
260-7046
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s)
Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

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NEONATAL / PERINATAL MEDICINE

MCCULLEY, DAVID

Provider ID: 277177

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1235304155

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285932

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1942253356

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 260-7107

After Hours Phone: (619)
260-7107

Provider Gender: Female

NPI: 1497941397

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262157

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1497941397

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301819

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301822

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

4077 5TH AVE

SAN DIEGO, CA 92103

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

ODONNELL, F

Provider ID: 205578

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1477625325

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

NPI: 1649433103

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES

Provider ID: 303906

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046

 After Hours Phone: (619) 260-7046

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY


NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206060

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (619) 543-3759

Fax: (619) 543-3812

 After Hours Phone: (619) 543-3759

Provider Gender: Male

NPI: 1205047545

 Provider English Spoken: Y


NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206171

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-3759

Fax: (619) 543-3812

 After Hours Phone: (619) 543-3759

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network




NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303904
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 249-5839





 After Hours Phone: (858) 966-5888
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SONG, RICHARD

Provider ID: 206143

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1881893477
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 206126

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 966-7483

After Hours Phone: (858)
966-5888

Provider Gender: Male

NPI: 1801978143

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MERCY HOSPITAL,
UCSD MEDICAL CTR, UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE

Provider ID: 265085

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1457433799

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE

SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1164572632

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

DIEGO, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303807

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8001 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1417121971

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303806

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 966-7483

After Hours Phone: (858) 966-5888

Provider Gender: Female

NPI: 1417121971

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303808

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858) 966-5888

Provider Gender: Female

NPI: 1417121971

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 264677
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818
Fax: (858) 966-7483

After Hours Phone: (858) 966-5818

Provider Gender: Female
NPI: 1053541862

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297073
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888
Fax: (858) 249-5839

After Hours Phone: (858) 966-5888

Provider Gender: Female
NPI: 1811151848

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEPHROLOGY

BALBOA NEPHROLOGY MED GRP INC,

Provider ID: 308472
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Phone: (858) 637-4700
Fax: (858) 637-4701

After Hours Phone: (858) 637-4700

NPI: 1316997505

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: www.balboacare.com

NEPHROLOGY

QUEVEDO, JUAN

Provider ID: 269998
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102

Phone: (619) 263-9729
Fax: (619) 263-9730

After Hours Phone: (619) 263-9729

Provider Gender: Male
NPI: 1093902496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, RIVERSIDE

COMMUNITY HOSP

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **ZHONG, YAN**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


NEPHROLOGY

SHAH, MITA


Provider ID: 262230

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

 8010 FROST ST STE 510
SAN DIEGO, CA 92123

 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1194773010

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Imperial Health Holdings


Medical Group-SD

NEPHROLOGY

Provider ID: 296054

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL
REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND

HEALTHCARE CTR, KECK
HOSPITAL OF USC, Los

Angeles General Medical
Center, SELECT SPECIALTY

HOSPITAL SAN DIEGO,
SELECT SPECIALTY HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


NEPHROLOGY

ZHONG, YAN

Provider ID: 296053

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL
REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND

HEALTHCARE CTR, KECK
HOSPITAL OF USC, Los

Angeles General Medical
Center, SELECT SPECIALTY

HOSPITAL SAN DIEGO,
SELECT SPECIALTY HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

NEUROLOGY


BEVINS, ELIZABETH


Provider ID: 241943

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013395151

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY


BUI, JONATHAN

Provider ID: 303227


Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


NEUROLOGY

BUI, JONATHAN

Provider ID: 206005

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 8001 FROST ST
SAN DIEGO, CA 92123


 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 304172

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240951

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240949

Board Certified Specialty: Yes
UCSD MEDICAL GROUP

📍 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

DOVE, KATHERINE

Provider ID: 302784

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3030 CHILDRENS WAY FL

4

SAN DIEGO, CA 92123

☎ Phone: (858) 966-5819

Fax: (858) 966-4930

📞 After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1033642574

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 304160

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781


📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1700177136

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

DUNN-PIRIO, ANASTASIE


Provider ID: 203235
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (619) 543-3500
Fax: (888) 539-8781

 After Hours Phone: (619)
543-3500

Provider Gender: Female
NPI: 1700177136

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

FREDERICK, ALIYA


Provider ID: 283152
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999
Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Female
NPI: 1548657992


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


NEUROLOGY

GOLD, JEFFREY

Provider ID: 283335


Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999
Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999


Provider Gender: Male
NPI: 1568773984

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

GOLD, JEFFREY

Provider ID: 303287

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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NETWORK

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

GUIDO-ESTRADA, NATALIE

Provider ID: 303271

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1528353521

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

GUNDOGDU, MELEK

Provider ID: 201623

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR FL 1

SAN DIEGO, CA 92103

Phone: (619) 543-3500

After Hours Phone: (619)
543-3500

Provider Gender: Female

NPI: 1437253671

Provider English Spoken: Y

Provider Language(s)

Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

HANNAWI, ANDREW

Provider ID: 283154

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1194179135

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD LA JOLLA JOHN

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D. دليل مقدمي الخدمات المتخصصين

SALLY THORNTON, UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 304154

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053326710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY


KHAMISHON, BORIS


Provider ID: 269923

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 6699 ALVARADO RD STE
2301



SAN DIEGO, CA 92120

 Phone: (619) 582-2595

 After Hours Phone: (619)
582-2595

Provider Gender: Male

NPI: 1104922038

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-4PM
F 8AM-3PM

 Website: N/A

IPA: Community Care IPA LLC

NEUROLOGY


KIMMCMANUS, OLIVIA

Provider ID: 303229


Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

LAVERTY, CHAMINDRA

Provider ID: 303258

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

NETWORK

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1538320395

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

LEE, DAVID

Provider ID: 304198

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID

Provider ID: 246263

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT




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PROVIDER




 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 268346
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801215926

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



NEUROLOGY




QAYOUMI, WALI

Provider ID: 284370
Board Certified Specialty: No

UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (619) 294-3746
Fax: (888) 539-8781
 After Hours Phone: (619)
294-3746
Provider Gender: Male
NPI: 1093178220


 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



NEUROLOGY

QAYOUMI, WALI

Provider ID: 304161
Board Certified Specialty: No
UCSD MEDICAL GROUP
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1093178220

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French


Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA



Provider ID: 304200
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1568655264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian


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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: UCSF
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY


RIGGINS, NINA

Provider ID: 285968

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1568655264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


NEUROLOGY


SCHORR, EMILY

Provider ID: 305023

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1255862041


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


NEUROLOGY

SCHORR, EMILY

Provider ID: 305021

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female


NPI: 1255862041


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


NEUROLOGY


SCHORR, EMILY

Provider ID: 305020

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NEUROLOGY

SWEAT, MARIE

Provider ID: 303831

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1861929036

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

YANG, JENNIFER

Provider ID: 301593

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1528420619

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 206272

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1487819546

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 303284

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1487819546
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

GRAVES, JENNIFER
Provider ID: 261037
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1992849863
☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSF MEDICAL
CENTER, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE
Provider ID: 205825
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 8001 FROST ST
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5999
Fax: (858) 966-4930
🕒 After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1528353521
☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

NEUROLOGY CHILD

SAHAGIAN, MICHELLE
Provider ID: 206074
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5999
Fax: (858) 966-4930
🕒 After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1275604035
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Rady Childrens Health Network</p>	<p>Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎ Phone: (800) 926-8273 📠 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1053727313 📄 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Providence St Mary Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>☐ Provider Language(s) Spoken: Faroese, Fataleka Cultural Competency: N Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: IHP of Southern Cal-PHP</p>
<hr/> <p>NUCLEAR MEDICINE</p> <p>SHARIF TABRIZI, AHMAD Provider ID: 300028 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 330 LEWIS ST SAN DIEGO, CA 92103 ☎ Phone: (800) 926-8273 📠 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1053727313 ☐ Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Providence St Mary Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group</p>	<hr/> <p>OBSTETRICS / GYNECOLOGY</p> <p>ASLIAN, AZITA Provider ID: 308270 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 950 S EUCLID AVE SAN DIEGO, CA 92114 ☎ Phone: (619) 662-4100 📠 Fax: (619) 662-4158 🕒 After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1851667661 ☐ Provider English Spoken: Y</p>	<hr/> <p>OBSTETRICS / GYNECOLOGY</p> <p>BLAKE, GARY Provider ID: 290731 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 6973 LINDA VISTA RD SAN DIEGO, CA 92111 ☎ Phone: (858) 279-0925 📠 Fax: (858) 633-4680 🕒 After Hours Phone: (858) 279-0925 Provider Gender: Male NPI: 1497738439 ☐ Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 16\None American Sign Language (ASL):</p>
<hr/> <p>NUCLEAR MEDICINE</p> <p>SHARIF TABRIZI, AHMAD Provider ID: 300027</p>		

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

COHEN, MANSOUR

Provider ID: 205940
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

7695 CARDINAL CT STE 390
SAN DIEGO, CA 92123

Phone: (858) 279-8111
Fax: (858) 279-4703

After Hours Phone: (858) 279-8111

Provider Gender: Male
NPI: 1346225356

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Hebrew, Persian, Spanish
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 9AM-4PM

Website: N/A
IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291328
Board Certified Specialty: No
UCSD MEDICAL GROUP

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291326
Board Certified Specialty: No
UCSD MEDICAL GROUP

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291327
Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 16\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY


DELCORE, LAURA

Provider ID: 291329


Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA


Provider ID: 291330

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY


Provider ID: 291338

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6030 VILLAGE WAY

SAN DIEGO, CA 92130


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY


DRIEBE, AMY

Provider ID: 291340

Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291337

Board Certified Specialty: No
UCSD MEDICAL GROUP

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291339

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FRUGONI, GINA

Provider ID: 270056

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (619) 400-5074

After Hours Phone: (619)
400-5074

Provider Gender: Female

NPI: 1578729315

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296002

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4682

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1235218439

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY








GROGAN, BRIAN

Provider ID: 296001






Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP




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D. دليل مقدمي الخدمات المتخصصين



 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male
NPI: 1235218439
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP




OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA
Provider ID: 257548
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891749842
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N








Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA
Provider ID: 257547
Board Certified Specialty: No
UCSD MEDICAL GROUP
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891749842
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 278915
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1457662868
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278917

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208294

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104143593

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242751

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972047397

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271561

Board Certified Specialty: No
UCSD MEDICAL GROUP

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 16\None


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY


KLEIN, DAVID

Provider ID: 271560

Board Certified Specialty: No
UCSD MEDICAL GROUP


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN


Provider ID: 205481

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 11939 RANCHO
BERNARDO RD STE 110
SAN DIEGO, CA 92128


 Phone: (858) 618-1156

Fax: (858) 618-3314

 After Hours Phone: (858)
618-1156

Provider Gender: Female

NPI: 1679517239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-4:30PM

F 8:30AM-2PM

 Website: N/A

IPA: Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 208681

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, EISENHOWER MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285519

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396904876

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, EISENHOWER MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 200965

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1770702177

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303064

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 6030 VILLAGE WAY

SAN DIEGO, CA 92130

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1770702177

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MANI, PARVIN

Provider ID: 242345

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

📍 5555 RESERVOIR DR STE 208

SAN DIEGO, CA 92120

☎ Phone: (619) 583-7555

Fax: (619) 583-0555

🕒 After Hours Phone: (619) 583-7555

Provider Gender: Female

NPI: 1518925015

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes




Min/Max Age: 10\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





D. دليل مقدمي الخدمات المتخصصين

N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Imperial Health Holdings Medical Group-SD

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285741
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1467585521
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285742
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781




 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY


MELENDEZ, ARIANA

Provider ID: 299922
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

Fax: (888) 539-8781



 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1295232973

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None




American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299921
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295232973

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE


Provider ID: 299979
Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299980
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6030 VILLAGE WAY
SAN DIEGO, CA 92130


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273


Provider Gender: Female


NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299978
Board Certified Specialty: No
UCSD MEDICAL GROUP


 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE


Provider ID: 299982
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299981
Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1447530696

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE


Provider ID: 284298

Board Certified Specialty: No


UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE


Provider ID: 284291

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1306372800

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284290

Board Certified Specialty: No


UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 360

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1306372800

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285176

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4168 FRONT ST

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689013468
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285174
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689013468

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
Provider ID: 290128
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
Fax: (619) 662-4158
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1053407593
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA

MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

OCCUPATIONAL MEDICINE

CROSS, JOHN
Provider ID: 255322
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (619) 471-9210
🕒 After Hours Phone: (619) 471-9210
Provider Gender: Male
NPI: 1205989985
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

ISAKARI, MARCIA
Provider ID: 255368

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-1600

After Hours Phone: (619)
471-1600

Provider Gender: Female

NPI: 1861580771

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese

Cultural Competency: N

Hospital Affiliation: ADVENTIST

HEALTH LODI MEMORIAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

KIM, JOHN

Provider ID: 255385

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9210

After Hours Phone: (619)
471-9210

Provider Gender: Male

NPI: 1114102639

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206549

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206548

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

LARSEN, JULIE

Provider ID: 258359

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-1809

After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1497009179

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

MIKUT, ALYSSA

Provider ID: 258415

Board Certified Specialty: No
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (858) 249-0832

Fax: (858) 657-1809

After Hours Phone: (858)
249-0832

Provider Gender: Female

NPI: 1952816134

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205620

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272789

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272803

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942662168

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BHATIA, SHAGUN


Provider ID: 240636

Board Certified Specialty: No


RADY CHILDRENS HEALTH

NETWORK

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

CAMP, ANDREW


Provider ID: 260020

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 309-7702

Provider Gender: Male

NPI: 1326300377

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER

Provider ID: 252313

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

📍 3969 4TH AVE STE 300

SAN DIEGO, CA 92103

☎ Phone: (619) 688-2648

Fax: (619) 688-2626

☎ After Hours Phone: (619) 688-2648

Provider Gender: Male

NPI: 1790769156

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297011

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

☎ After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1699216010

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297009

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

☎ After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1699216010

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 245200

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 295645

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302869

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858) 609-7100

Provider Gender: Male

NPI: 1760845184

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

KHATIB, NORA

Provider ID: 305375

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4060 4TH AVE STE 640
SAN DIEGO, CA 92103

Phone: (619) 642-2240

Fax: (619) 642-2245

After Hours Phone: (619)

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642-2240
 Provider Gender: Female
 NPI: 1538487756
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SHARP CHULA
 VISTA MED CTR, GROSSMONT
 HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 14\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

KLINE, LANNING

Provider ID: 239915
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4060 4TH AVE STE 610
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1841227477
 Provider English Spoken: Y

Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

OPHTHALMOLOGY

LI, ALEXANDRIA

Provider ID: 272833
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1841652864
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, SCRIPPS GREEN
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group




OPHTHALMOLOGY




LIU, YUNXIANG

Provider ID: 210803
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 After Hours Phone: (858)
 309-7702
 Provider Gender: Female
 NPI: 1770849804
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, RADY CHILDRENS
 HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205510
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK




 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702


Provider Gender: Female
 NPI: 1861648602
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216412
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 After Hours Phone: (858) 309-7702


Provider Gender: Male
 NPI: 1497792220
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group




OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205888
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702

Provider Gender: Male
 NPI: 1235287947
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 287883

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295646

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

10737 CAMINO RUIZ

SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 305445

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

10737 CAMINO RUIZ STE

100

SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295647

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Phone: (619) 283-1303
Fax: (619) 283-1666
 After Hours Phone: (619) 283-1303
Provider Gender: Male
NPI: 1588027213
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPHTHALMOLOGY




PHAN, RYAN





Provider ID: 302925
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
 Phone: (619) 283-1303

Fax: (619) 283-1666
 After Hours Phone: (619)
283-1303
Provider Gender: Male
NPI: 1588027213
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPHTHALMOLOGY




PUIG LLANO, MANUEL

Provider ID: 299964
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1427102979
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, German,
Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

SATTERFIELD, KELLIE

Provider ID: 305302
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
 Phone: (858) 450-1010
Fax: (858) 450-9451
 After Hours Phone: (858)
450-1010
Provider Gender: Female
NPI: 1629509336

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305305
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 5330 CARROLL CANYON
 RD STE 210
 SAN DIEGO, CA 92121
 Phone: (858) 450-1010
 Fax: (858) 450-9451
 After Hours Phone: (858)
 450-1010
 Provider Gender: Female
 NPI: 1932605649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8:30AM-4PM
 W-F 8:30AM-1PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 UCSD Medical Group

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299936
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1932605649
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8:30AM-4PM
 W-F 8:30AM-1PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 UCSD Medical Group

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305306
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3939 3RD AVE
 SAN DIEGO, CA 92103
 Phone: (800) 765-2737
 Fax: (619) 291-6577
 After Hours Phone: (800)
 765-2737

Provider Gender: Female
 NPI: 1932605649

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8:30AM-4PM
 W-F 8:30AM-1PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 UCSD Medical Group

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302872
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 7695 CARDINAL CT STE 100

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92123
☎ Phone: (858) 609-7100
Fax: (858) 609-7106
🕒 After Hours Phone: (858) 609-7100
Provider Gender: Male
NPI: 1437689536
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

OPHTHALMOLOGY

YAMADA, KENTARO

Provider ID: 295848
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
☎ Phone: (619) 299-1100
Fax: (619) 299-7156
🕒 After Hours Phone: (619)
299-1100
Provider Gender: Male

NPI: 1629047188
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Japanese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

AOTO, KIM

Provider ID: 268718
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
Fax: (858) 565-2449
🕒 After Hours Phone: (858)
565-8822
Provider Gender: Female
NPI: 1780935650
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 9AM-5PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5PM
F 8:30AM-4PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST



AOTO, KIM

Provider ID: 296795
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
Fax: (858) 565-2449
🕒 After Hours Phone: (858)
565-8822
Provider Gender: Female
NPI: 1780935650
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.









D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M 9AM-5PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5PM
F 8:30AM-4PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

AOTO, KIM

Provider ID: 268723
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (800) 898-2020
Fax: (844) 897-3788
 After Hours Phone: (800)
898-2020
Provider Gender: Female
NPI: 1780935650
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

JOMOC, CAITLIN


Provider ID: 304156
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group



OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304155
Board Certified Specialty: No
UCSD MEDICAL GROUP
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group


OPTOMETRIST

KIM, PHILIP


Provider ID: 287910
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 Phone: (800) 926-8372
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

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D. دليل مقدمي الخدمات المتخصصين

SCHWAB, GARY

Provider ID: 290411

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1740274372

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290410

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1740274372

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

VO, ANDREW

Provider ID: 201312

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR STE 101

SAN DIEGO, CA 92103

Phone: (619) 543-7907

After Hours Phone: (619)
543-7907

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

VO, ANDREW

Provider ID: 304147

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1639697451

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL

Provider ID: 301683

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1639697451

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL

Provider ID: 301680

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1639697451

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 304727

RADY CHILDRENS HEALTH NETWORK

📍 2878 CAMINO DEL RIO S
STE 210

SAN DIEGO, CA 92108

☎ Phone: (619) 298-2200

Fax: (619) 298-2250

☎ After Hours Phone: (619) 298-2200

Provider Gender: Male

NPI: 1629205174

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 273663

Board Certified Specialty: No

RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

NETWORK

501 WASHINGTON ST STE 710

SAN DIEGO, CA 92103

Phone: (619) 295-6774

Fax: (619) 295-6776

After Hours Phone: (619) 295-6774

Provider Gender: Male

NPI: 1629205174

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 272565

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299635

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299634

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH


Provider ID: 299461
Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273


Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A


IPA: UCSD Medical Group


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299462
Board Certified Specialty: No
UCSD MEDICAL GROUP


 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299457
Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 205628
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK



 3030 CHILDRENS WAY STE
109

SAN DIEGO, CA 92123
 Phone: (858) 309-7702

 After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1154492916

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N



























 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A

IPA: Rady Childrens Health Network

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<p style="text-align: center;">OTOLARYNGOLOGY</p> <p>CARVALHO, DANIELA Provider ID: 272557 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123  Phone: (858) 309-7701 Fax: (858) 966-8038  After Hours Phone: (858) 309-7701 Provider Gender: Female NPI: 1154492916  Provider English Spoken: Y  Provider Language(s) Spoken: French, Spanish Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network</p>	<p>Provider ID: 309535 Board Certified Specialty: No COMMUNITY CARE IPA LLC  5405 OBERLIN DR FL 2 SAN DIEGO, CA 92121  Phone: (858) 909-0770 Fax: (858) 909-0880  After Hours Phone: (858) 909-0770 Provider Gender: Male NPI: 1528146008  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Community Care IPA LLC</p>	<p>Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group</p>
<p style="text-align: center;">OTOLARYNGOLOGY</p> <p>CHANG, EDWARD</p>	<p style="text-align: center;">OTOLARYNGOLOGY</p> <p>COFFEY, CHARLES Provider ID: 299582 Board Certified Specialty: No UCSD MEDICAL GROUP  16950 VIA TAZON SAN DIEGO, CA 92127  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1932297330  Provider English Spoken: Y</p>	<p style="text-align: center;">OTOLARYNGOLOGY</p> <p>COFFEY, CHARLES Provider ID: 299579 Board Certified Specialty: No UCSD MEDICAL GROUP  200 W ARBOR DR SAN DIEGO, CA 92103  Phone: (619) 543-6631 Fax: (619) 471-0656  After Hours Phone: (619) 543-6631 Provider Gender: Male NPI: 1932297330  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299583

Board Certified Specialty: No
 UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
 LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM


Provider ID: 299568

Board Certified Specialty: No

UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
 LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM


Provider ID: 299569

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD
 MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM


Provider ID: 299567

Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):




























N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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<p>OTOLARYNGOLOGY</p>	<p>N  Accessibility: CONTACT PROVIDER</p>	<p>THORNTON, UCSD MEDICAL CTR</p>
<p>FRIEDMAN, RICK Provider ID: 299530 Board Certified Specialty: No UCSD MEDICAL GROUP</p>	<p> Website: N/A IPA: UCSD Medical Group</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):</p>
<p> 16950 VIA TAZON SAN DIEGO, CA 92127</p>	<p>OTOLARYNGOLOGY</p>	<p>N  Accessibility: CONTACT PROVIDER</p>
<p> Phone: (800) 926-8273  Fax: (888) 539-8781</p>	<p>FRIEDMAN, RICK Provider ID: 299531 Board Certified Specialty: No UCSD MEDICAL GROUP</p>	<p> Website: N/A IPA: UCSD Medical Group</p>
<p> After Hours Phone: (800) 926-8273</p>	<p> 8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122</p>	<p>OTOLARYNGOLOGY</p>
<p>Provider Gender: Male NPI: 1982708558</p>	<p> Phone: (800) 926-8273  Fax: (888) 539-8781</p>	<p>FRIEDMAN, RICK Provider ID: 299532 Board Certified Specialty: No UCSD MEDICAL GROUP</p>
<p> Provider English Spoken: Y  Provider Language(s) Spoken: Spanish</p>	<p> After Hours Phone: (800) 926-8273</p>	<p> 200 W ARBOR DR SAN DIEGO, CA 92103</p>
<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>	<p>Provider Gender: Male NPI: 1982708558</p>	<p> Phone: (800) 926-8273  Fax: (888) 539-8781</p>
<p> Provider English Spoken: Y  Provider Language(s) Spoken: Spanish</p>	<p> After Hours Phone: (800) 926-8273</p>	<p> After Hours Phone: (800) 926-8273</p>
<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>	<p> Provider English Spoken: Y  Provider Language(s) Spoken: Spanish</p>	<p>Provider Gender: Male NPI: 1982708558</p>
<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>	<p> Provider English Spoken: Y  Provider Language(s) Spoken: Spanish</p>	<p> Provider English Spoken: Y  Provider Language(s) Spoken: Spanish</p>
<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>	<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>	<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>
<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):</p>	<p>UCSD LA JOLLA JOHN SALLY</p>	<p>Cultural Competency: N Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p>


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MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


FRIESEN, TZYYNONG

Provider ID: 272604

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1952740177


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299560

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299559

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299561

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

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D. دليل مقدمي الخدمات المتخصصين

926-8273
Provider Gender: Female
NPI: 1003825571
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298396
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298397
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female

NPI: 1144583931
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 272959
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 299576
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417988783
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD

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D. دليل مقدمي الخدمات المتخصصين


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299575

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299514

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299511

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-8590

 After Hours Phone: (858)

657-8590

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


HOM, DAVID

Provider ID: 299515

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301052

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301053

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


JIANG, WEN

Provider ID: 272660


Board Certified Specialty: Yes

RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123


 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1659305753

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299446

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299443

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6631

☎ After Hours Phone: (619) 543-6631

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299445

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780860536

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 272637

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7701

Fax: (858) 966-8038

☎ After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1124230909

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 272767

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (855) 309-7701

Fax: (858) 966-4062

 After Hours Phone: (855)
309-7701

Provider Gender: Male


NPI: 1891858379


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


OTOLARYNGOLOGY

MAGIT, ANTHONY


Provider ID: 299482

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299481

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299480

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299590

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299591

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299592

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299607

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299603

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6631

Fax: (619) 543-6532

 After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299606

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

PATEL, VIJAY


Provider ID: 297037

Board Certified Specialty: No


RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY STE
1

SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


OTOLARYNGOLOGY

**VAHABZADEH-HAGH,
ANDREW**

Provider ID: 299509

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346506920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299508

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346506920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299507

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346506920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299641

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346270816

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N








♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<hr/> OTOLARYNGOLOGY <hr/> WATSON, DEBORAH Provider ID: 299639 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (619) 543-6631 After Hours Phone: (619) 543-6631 Provider Gender: Female NPI: 1346270816 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1346270816  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group
<hr/> OTOLARYNGOLOGY <hr/> WATSON, DEBORAH Provider ID: 299642 Board Certified Specialty: No UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122 Phone: (800) 926-8273 Fax: (888) 539-8781	<hr/> OTOLARYNGOLOGY <hr/> WEISSBROD, PHILIP Provider ID: 299615 Board Certified Specialty: No UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122 Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1366590853  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	<hr/> OTOLARYNGOLOGY <hr/> WEISSBROD, PHILIP Provider ID: 299610 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR STE 505 SAN DIEGO, CA 92103 Phone: (858) 657-8590 After Hours Phone: (858) 657-8590 Provider Gender: Male NPI: 1366590853  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group
<hr/> OTOLARYNGOLOGY <hr/> WATSON, DEBORAH Provider ID: 299642 Board Certified Specialty: No UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122 Phone: (800) 926-8273 Fax: (888) 539-8781	<hr/> OTOLARYNGOLOGY <hr/> WEISSBROD, PHILIP Provider ID: 299615 Board Certified Specialty: No UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122 Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1366590853  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL Medi-Cal Open Panel: Yes	<hr/> OTOLARYNGOLOGY <hr/> WEISSBROD, PHILIP Provider ID: 299614

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298412

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298413

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298414

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC


FADARE, OLUWOLE

Provider ID: 275705

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-5764

Fax: (619) 543-5249

 After Hours Phone: (619)
543-5764

Provider Gender: Male

NPI: 1619955804

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC


HANSEN, LAWRENCE


Provider ID: 275767

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-5764

 After Hours Phone: (619)
543-5764

Provider Gender: Male

NPI: 1760407498

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA


Provider ID: 275888

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1629163100

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC


WONG, RICHARD

Provider ID: 243202

Board Certified Specialty: No

UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781





 After Hours Phone: (800)
926-8273

Provider Gender: Male






NPI: 1275084295




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D. دليل مقدمي الخدمات المتخصصين





 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group




PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH
 Provider ID: 275756
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1174814065
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, SCRIPPS

MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 UCSD MEDICAL CTR, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS,
 SCRIPPS GREEN HOSPITAL,
 SCRIPPS GREEN HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
 Provider ID: 275720
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1184674145
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY




THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
 Provider ID: 275721
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 10300 CAMPUS POINT DR
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1184674145
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

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 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK

Provider ID: 247581
Board Certified Specialty: No
UCSD MEDICAL GROUP
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1942529821
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):





N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group




PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK


Provider ID: 247580
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1942529821
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):





N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

QUINTANA, PAULINA

Provider ID: 296765
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 292 EUCLID AVE STE 115

SAN DIEGO, CA 92114

 *Phone: (619) 266-3332*
Fax: (619) 266-6000
 *After Hours Phone: (619) 266-3332*
Provider Gender: Female
NPI: 1164482477
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N

PATHOLOGY ANATOMIC

CLINICAL


ROMA, ANDRES




Provider ID: 275826
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1295912657

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D. دليل مقدمي الخدمات المتخصصين



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED


Provider ID: 275781
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1679521579



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY


THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL


SONG, WEI



Provider ID: 300001
Board Certified Specialty: No
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1306164157

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group


PATHOLOGY ANATOMIC

CLINICAL

STEPHENS, LAURA


Provider ID: 300042
Board Certified Specialty: No
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1942561212

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275789
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1174757181
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

WANG, DEHUA
Provider ID: 289153
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (858) 966-6776
Fax: (858) 966-6707
🕒 After Hours Phone: (858)
966-6776
Provider Gender: Female
NPI: 1578790655
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PATHOLOGY CLINICAL

KELNER, MICHAEL
Provider ID: 247601
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1174679849

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EL CENTRO REGIONAL
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL
Provider ID: 247602
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1174679849

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EL CENTRO REGIONAL
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

LE DZUNG, THE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 247600
Board Certified Specialty: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1770526931
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

LE DZUNG, THE
Provider ID: 247599
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1770526931
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PEDIATRIC ALLERGY / IMMUNOLOGY

ALKATIB, RHONDA
Provider ID: 291226
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2655 CAMINO DEL RIO N STE 425
SAN DIEGO, CA 92108
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619) 286-6687
Provider Gender: Female
NPI: 1417363086

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN
Provider ID: 285133
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1205128089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, RADY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

Min/Max Age: 0\19

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY


COLLINS, CATHLEEN


Provider ID: 206083

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY STE 2

SAN DIEGO, CA 92123

 Phone: (858) 966-5961

 After Hours Phone: (858) 966-5961

Provider Gender: Female

NPI: 1205128089

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD

CHILDRENS HOSP, Stanford
Health Care, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

PEDIATRIC ALLERGY / IMMUNOLOGY


GENG, BOB


Provider ID: 205824

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY STE 2

SAN DIEGO, CA 92123

 Phone: (858) 966-5961

 After Hours Phone: (858) 966-5961

Provider Gender: Male

NPI: 1356570758

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N


PEDIATRIC ALLERGY / IMMUNOLOGY


GENG, BOB

Provider ID: 205823

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858) 292-1144

Provider Gender: Male

NPI: 1356570758

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

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D. دليل مقدمي الخدمات المتخصصين

Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205697

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123

Phone: (858) 966-4900

After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

Provider English Spoken: Y

Provider Language(s)
Spoken: French, German,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-0PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC ALLERGY /

IMMUNOLOGY

LEIBEL, SYDNEY

Provider ID: 205724

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5776 RUFFIN RD
SAN DIEGO, CA 92123

Phone: (858) 292-1144

After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1861666919

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY

Provider ID: 205725

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
2 NORTH

SAN DIEGO, CA 92123

Phone: (858) 966-5961

After Hours Phone: (858)
966-5961

Provider Gender: Male

NPI: 1861666919

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

BOCK, MATTHEW

Provider ID: 280463

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903


After Hours Phone: (858)
966-5855

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1356514624


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR,
LOMA LINDA UNIVERSITY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284120

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855


Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1114277787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC CARDIOLOGY

CHAU, PETER


Provider ID: 271427

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1407146947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY
CHILDRENS HOSPITAL, LOMA

LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):



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N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DO, THOMAS

Provider ID: 206162
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123
 Phone: (858) 366-5855
 Fax: (858) 966-7423
 After Hours Phone: (858) 366-5855
 Provider Gender: Male
 NPI: 1053545376
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL AT MISSION, CHILDRENS HOSPITAL OF ORANGE COUNTY
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


DUMMER, KIRSTEN

Provider ID: 260595
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5855
 Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855


Provider Gender: Female
 NPI: 1780642280

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network



PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5855
 Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1962974956

 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network



PEDIATRIC CARDIOLOGY

GORDON, BRENT

Provider ID: 295391

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5855
 Fax: (858) 966-7903


 After Hours Phone: (858) 966-5855

Provider Gender: Male


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D. دليل مقدمي الخدمات المتخصصين

NPI: 1669480083

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SANTA MONICA UCLA MED CTR, SAN ANTONIO COMM HOSP, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205687

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903


 After Hours Phone: (858) 966-5855


Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

JUSTINO, HENRI

Provider ID: 284123

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1518036821


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

LEHNERTSCHUCHARDT, ELEANOR

Provider ID: 262250

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855


Provider Gender: Female

NPI: 1760707210

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER





 Hours: M-F 8AM-5PM

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 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL
Provider ID: 206147
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-4912
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-4912

Provider Gender: Female
NPI: 1487821815


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

MUELLER, DANA

Provider ID: 245535
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1184915712

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 205349
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC CARDIOLOGY

RAO, ROHIT

Provider ID: 206122
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1063452779

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

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CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


SILVASEPULVEDA, JOSE

Provider ID: 206297

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1417222472


 Provider English Spoken: Y Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


STEINBERG, LEONARD


Provider ID: 248208

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1538279484

 Provider English Spoken: Y Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


VAUGHN, GABRIELLE


Provider ID: 205643

Board Certified Specialty: No


RADY CHILDRENS HEALTH NETWORK

NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-7423

 After Hours Phone: (858) 576-1700

Provider Gender: Female

NPI: 1891004461


 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY


VELLOREGOVARDHAN, SHILPA

Provider ID: 271454

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5855

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D. دليل مقدمي الخدمات المتخصصين

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1477702165

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1235391863

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 206287

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7423

☎ After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1831423250

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

YOUNOSZAI, ADEL

Provider ID: 303133

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1952493819

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

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IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 283142

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6795

Fax: (858) 966-7479

After Hours Phone: (858) 966-6795

Provider Gender: Female

NPI: 1295198091

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 303679

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 120
SAN DIEGO, CA 92123

Phone: (858) 966-6795

Fax: (858) 966-7479

After Hours Phone: (858) 966-6795

Provider Gender: Female

NPI: 1295198091

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 304918

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1851927883

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303780

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614


After Hours Phone: (619) 280-2905


Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE


AMIRNOVIN, RAMBOD

Provider ID: 297673

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629104492

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA

UNIVERSITY MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, LONG BEACH

MEMORIAL MED CTR, EARL

AND LORRAINE MILLER

CHILDRENS HSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE

AUSTIN-PAGE, LUKAS

Provider ID: 205589

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)

966-8800

Provider Gender: Male

NPI: 1326301862

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation:


CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE


BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1609281450



 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish





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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE






BRYL, AMY




Provider ID: 205967
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1497079487
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE





CAMPBELL, SARA

Provider ID: 206335
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1841687563
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network




PEDIATRIC EMERGENCY MEDICINE


CHOO, SUN




Provider ID: 296535
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1700047628
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health Network




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

CONRAD, HEATHER

Provider ID: 205960
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800

Provider Gender: Female
 NPI: 1205813409




 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
 American Sign Language (ASL):
 N


PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN



Provider ID: 296536
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905

Provider Gender: Female
 NPI: 1700047628

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No
 Min/Max Age: 0\19




American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM

PEDIATRIC EMERGENCY


MEDICINE

DELRE, ANGELO


Provider ID: 206081
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800

Provider Gender: Male
 NPI: 1275761371

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS



Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين




PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE

Provider ID: 288572
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800


Provider Gender: Female
NPI: 1366622078

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE

Provider ID: 287393
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800


Provider Gender: Female
NPI: 1750513644

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: Rady Childrens Health Network



PEDIATRIC EMERGENCY MEDICINE

DONOFRIO-ODMANN, JOY


Provider ID: 205375
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800


Provider Gender: Female
NPI: 1740571165

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

EKPENYONG, ATIM

Provider ID: 205722
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92123
☎ Phone: (858) 576-1700
🕒 After Hours Phone: (858) 576-1700
Provider Gender: Female
NPI: 1932318565
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

FISHER, JAY
Provider ID: 295690
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858) 966-8800

966-8800
Provider Gender: Male
NPI: 1629118518
🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GIBONEY, JENNIFER
Provider ID: 205925
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1275895849
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 275784
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105
☎ Phone: (619) 280-2058
📠 Fax: (858) 633-4682
🕒 After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1316162324
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
SA 8AM-2PM
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE


GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105


 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1942223664


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297174

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC EMERGENCY MEDICINE

HERSKOVITZ, SCOTT

Provider ID: 261045

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1225393499

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC EMERGENCY MEDICINE

HUNTER, WENDY

Provider ID: 206278

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)

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D. دليل مقدمي الخدمات المتخصصين

966-8800
Provider Gender: Female
NPI: 1053515551
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

INDRA, SEAN
Provider ID: 302625
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
📞 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1427349091
☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

ISHIMINE, PAUL
Provider ID: 206236
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
📞 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1437184421
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

JACKSON, TAYLOR
Provider ID: 302127
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5999
Fax: (858) 966-8519
📞 After Hours Phone: (858)
966-5999
Provider Gender: Male
NPI: 1326543752
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

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IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KHAN, SHAHFAR

Provider ID: 294094

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1013361815

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302317

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1609495399

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 248071

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366761959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295668

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

NETWORK

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1134681265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN

Provider ID: 275654

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1528483955

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY

Provider ID: 205348

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1073740205

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID

Provider ID: 302146

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1194145946

Provider English Spoken: Y
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

MURRAY, MATTHEW

Provider ID: 205759

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1215103023

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MARGARET

Provider ID: 270705

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1942485248

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MYLINH

Provider ID: 262299

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1730428053

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

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D. دليل مقدمي الخدمات المتخصصين

MEDICINE

OZCAN, ALI

Provider ID: 287923

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1265867683

Provider English Spoken: Y

Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA

UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

PADE, KATHRYN

Provider ID: 262411

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1215375183

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302352

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1710418744

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD

Provider ID: 295457

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1881695914

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D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: No
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 205784
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1477626513
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Spanish
 Cultural Competency: N
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206947
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1124360565
 Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206949
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905
 Provider Gender: Female
 NPI: 1124360565
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216970

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1740468057

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RUIZ, MONICA

Provider ID: 305340

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1982059689

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL

Provider ID: 301250

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Male

NPI: 1215564265

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

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MEDICINE

RUSSELL, SAMUEL

Provider ID: 301249

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1215564265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

MEDICINE

SALEH, FAREED

Provider ID: 206216

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1366691115

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

MEDICINE

SCHROTER, STEPHANIE

Provider ID: 243830

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1073951828

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

MEDICINE

SHERER, KIMBERLY

Provider ID: 284168

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1992202964

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): Provider ID: 301635

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE


SHETH, SARIKA

Provider ID: 248171

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1336503234


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858) 966-6789

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND

Medi-Cal Open Panel: No


Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE


SOUDER, CHRISTOPHER

Provider ID: 301636

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC EMERGENCY MEDICINE


TAMAS, VANESSA

Provider ID: 206212

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858) 576-1700

Provider Gender: Female

NPI: 1326225368

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW

Provider ID: 294677
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1184071516
🗣 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302800
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105
☎ Phone: (619) 280-2905
📠 Fax: (619) 283-1614
🕒 After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1407299787
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED

CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE



TRAN, THERESA

Provider ID: 301834
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1417496985
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين




DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network



PEDIATRIC EMERGENCY MEDICINE

TRAUT, JOEL

Provider ID: 205475
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700

Provider Gender: Male
NPI: 1982792065

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


PEDIATRIC EMERGENCY MEDICINE

ULRICH, STACEY

Provider ID: 205847
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8036

 After Hours Phone: (858)
966-8036

Provider Gender: Female
NPI: 1619049236


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205811
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1083840920


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

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MEDICINE

VAIDYA, KAMALA

Provider ID: 205809

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1083840920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VANE, JACKSON

Provider ID: 205883

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1952608580

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VANWOY, LAUREN

Provider ID: 301574

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1568959161

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 285934

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

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D. دليل مقدمي الخدمات المتخصصين

DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 285935

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 576-1700

Fax: (858) 966-8479

After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 296486

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

VAYNGORTIN, TATYANA

Provider ID: 263012

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1578967907

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

WANG, YVETTE

Provider ID: 263416

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1710321278

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

WANG, VINCENT

Provider ID: 309661

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
Fax: (858) 966-7433

After Hours Phone: (858) 966-8800

Provider Gender: Male
NPI: 1083713655

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

YAPHOCKUN, KARENKIM

Provider ID: 206184

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 576-1700
After Hours Phone: (858) 576-1700

Provider Gender: Female
NPI: 1861880817

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

CYMBALUK, ANNA

Provider ID: 294214

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 4


SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227




After Hours Phone: (858) 966-4032

Provider Gender: Female
NPI: 1043674849

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D. دليل مقدمي الخدمات المتخصصين




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network


PEDIATRIC ENDOCRINOLOGY




PATTERSON, MARY

Provider ID: 206059
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
4 NORTH
SAN DIEGO, CA 92123
 Phone: (858) 966-4032
Fax: (858) 966-6227
 After Hours Phone: (858)
966-4032

Provider Gender: Female
NPI: 1912112020




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network


PEDIATRIC ENDOCRINOLOGY



SINGH, PUJA


Provider ID: 302818
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-4032
Fax: (858) 966-6227
 After Hours Phone: (858)
966-4032

Provider Gender: Female
NPI: 1841721172

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

 Website: N/A
IPA: Rady Childrens Health
Network


PEDIATRIC ENDOCRINOLOGY

VARGASTRUJILLO, MARCELA

Provider ID: 205605
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK



 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-4032
Fax: (858) 966-4032
 After Hours Phone: (858)
966-4032

Provider Gender: Female
NPI: 1952534091

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC

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GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301639

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1912369273

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

GOYAL, NIDHI

Provider ID: 205598

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 SOUTH

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1598029332

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

HARTMANN, PHILLIPP

Provider ID: 294228

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1356796536

Provider English Spoken: Y

Provider Language(s) Spoken: French, German
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

LIN, TOM

Provider ID: 297707

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL

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D. دليل مقدمي الخدمات المتخصصين

2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
📞 After Hours Phone: (858) 966-4003
Provider Gender: Male
NPI: 1114136934
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SCHWARZ, KATHLEEN
Provider ID: 205885
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
📞 After Hours Phone: (858)

966-4003
Provider Gender: Female
NPI: 1265465918
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

YOUNG, JOCELYN
Provider ID: 294675
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
📞 After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1306227491

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

BRIGGS, BENJAMIN
Provider ID: 274689
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
📍 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5811
☎ Fax: (858) 966-8035
📞 After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1952695777
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

DIEGO, NAVAL MEDICAL CTR
SD RBE

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

BUSH, KELLY

Provider ID: 274408

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1073831079

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

CHOO, SUN

Provider ID: 206115

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY STE
2-WEST

SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

DING, HILDA

Provider ID: 206173

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1780813923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

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ELSTER, JENNIFER

Provider ID: 205769

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1588866115

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA

Provider ID: 205882

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1982091740

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE

Provider ID: 296760

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1396942470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

KUO, DENNIS

Provider ID: 205433

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811


Provider Gender: Male

NPI: 1750492146




Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين





 *Provider Language(s)*
Spoken: Chinese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY








LI, HOJUN


Provider ID: 307300
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (858) 966-5811*
Fax: (858) 966-8035
 *After Hours Phone: (858)
966-5811*
Provider Gender: Male
NPI: 1730455239
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY



SRIDHAR, SUNITA

Provider ID: 302088
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (858) 966-5811*
Fax: (858) 966-8035
 *After Hours Phone: (858)
966-5811*
Provider Gender: Female
NPI: 1649707365
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-5PM*

 *Website: N/A*
IPA: Rady Childrens Health
Network


PEDIATRIC HEMATOLOGY / ONCOLOGY




WONG, VICTOR

Provider ID: 206149
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
 3010 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5811*
Fax: (858) 966-8035

 *After Hours Phone: (858)
966-5811*

Provider Gender: Male
NPI: 1154692473

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

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YU, JENNIFER

Provider ID: 206148

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1326315599

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA

Provider ID: 301583

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1881127736

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ZAGE, PETER

Provider ID: 206315

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3010 CHILDRENS WAY STE
2W

SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1912003161

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND

Provider ID: 289138

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-7785

Fax: (858) 966-8658





After Hours Phone: (858)
966-7785

Provider Gender: Male

NPI: 1760460026





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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

PEDIATRIC NEPHROLOGY

CARTER, CAITLIN

Provider ID: 302777
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8110 BIRMINGHAM WAY FL
 1
 SAN DIEGO, CA 92123
 Phone: (858) 966-8052
 Fax: (858) 966-7789
 After Hours Phone: (858)
 966-8052
 Provider Gender: Female
 NPI: 1255514618
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS GREEN
 HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR, SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

PEDIATRIC NEPHROLOGY





INGULLI, ELIZABETH

Provider ID: 302778
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8110 BIRMINGHAM WAY
 STE 28
 SAN DIEGO, CA 92123
 Phone: (858) 966-8052
 Fax: (858) 966-7789
 After Hours Phone: (858)
 966-8052
 Provider Gender: Female
 NPI: 1811919244
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD MEDICAL CTR,

SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

PEDIATRIC NEPHROLOGY

MAK, ROBERT

Provider ID: 302776
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8110 BIRMINGHAM WAY FL
 1
 SAN DIEGO, CA 92123
 Phone: (858) 966-8052
 Fax: (858) 966-7789
 After Hours Phone: (858)
 966-8052
 Provider Gender: Male
 NPI: 1740295252
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes

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 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRIC PULMONOLOGY


BHATTACHARJEE, RAKESH

Provider ID: 246060

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858) 576-1700

Provider Gender: Male

NPI: 1588781173

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH

Provider ID: 205950


Board Certified Specialty: No


PEDIATRIC NEPHROLOGY

PERENS, ELLIOT

Provider ID: 302765

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Male

NPI: 1922328947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND, UCSF MEDICAL

CENTER, SHARP MEMORIAL
HOSPITAL, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


PEDIATRIC PULMONOLOGY

AKONG, KATHRYN

Provider ID: 205673

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1912169061

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 NORTH

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Male

NPI: 1588781173

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA

Provider ID: 243042

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1871752451

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA

Provider ID: 243041

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1871752451

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

FINCH, CHRISTINA

Provider ID: 302581

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1598255325

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

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DIEGO, UCSD MEDICAL CTR N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

PEDIATRIC PULMONOLOGY


FIREIZEN, YARON

Provider ID: 302329

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1699123927

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY

Provider ID: 284176

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 569-9052

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1255750360

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY


LANDEOGUTIERREZ, JEREMY

Provider ID: 284177

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1255750360

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS,
PATRICIA**

Provider ID: 294641

Board Certified Specialty: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-4:30PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206123

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 569-9052

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1649222340

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206124

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-5847

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1649222340

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RYU, JULIE

Provider ID: 206218

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 NORTH

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 569-5847

After Hours Phone: (858) 966-5846

Provider Gender: Female




NPI: 1568533321

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

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CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network


PEDIATRIC PULMONOLOGY

TANTISIRA, KELAN




Provider ID: 277183
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 569-9052
 After Hours Phone: (858)
966-5846

Provider Gender: Male
NPI: 1760420434

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network


PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246394
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8082
 After Hours Phone: (858)
966-8082



Provider Gender: Female
NPI: 1821242199

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: Rady Childrens Health Network


PEDIATRIC RHEUMATOLOGY

SHEETS, ROBERT



Provider ID: 255900
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8082
Fax: (858) 966-4067

 After Hours Phone: (858)
966-8082

Provider Gender: Male
NPI: 1013088772



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4:30PM
 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

ALAGIRI, MADHU

Provider ID: 206387
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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D. دليل مقدمي الخدمات المتخصصين

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Male

NPI: 1619083961

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302345

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1437786944

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302344

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1437786944

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293220

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293219

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (619) 280-2058

Provider Gender: Male

NPI: 1467436063

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

BEAUCHAMP-WALTERS, JULIA

Provider ID: 270063

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5841

Fax: (858) 966-6728

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1457420713

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

CAMERON, MELISSA

Provider ID: 205965

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5841

Fax: (858) 966-6728

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1902983752

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

CANTU, ALICIA

Provider ID: 205753

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY STE 300

SAN DIEGO, CA 92123

☎ Phone: (858) 966-8974

Fax: (858) 966-6721

☎ After Hours Phone: (858) 966-8974

Provider Gender: Female

NPI: 1922179688

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CANTU, ALICIA

Provider ID: 205752

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1922179688

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

CHONG, AMY

Provider ID: 259993

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5803

Fax: (858) 966-5992

After Hours Phone: (858)
966-5803

Provider Gender: Female

NPI: 1720423288

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293275

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293274

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOSHI, AMI

Provider ID: 205330

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 300

SAN DIEGO, CA 92123

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858) 966-8974

Provider Gender: Female

NPI: 1801099676

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

DOSHI, AMI

Provider ID: 205329

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1801099676

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296241

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)

280-2058

Provider Gender: Female

NPI: 1275895849

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296242

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1275895849

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network


PEDIATRICS

GRAY, SARAH

Provider ID: 284224

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1508210311

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRICS

HUANG, MARIA

Provider ID: 205974

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1770841140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRICS

JIMENEZBACARDI, ADRIA

Provider ID: 294640

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Male

NPI: 1467847293

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: ST MARYS HOSPITAL AND MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Network

PEDIATRICS

JINDAL, ANUJA

Provider ID: 303285

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 213847

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

PEDIATRICS

KHARE, MANASWITHA

Provider ID: 206289

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1912345307

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

LEE, BEGEM

Provider ID: 205923

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1053672444

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS


LOPEZ, XIMENA

Provider ID: 302856


Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 Phone: (858) 966-4032


Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1740316405

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRICS

MANNINOAVILA, ELIZABETH


Provider ID: 262161

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1164747127

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PEDIATRICS

MARANO, RACHEL


Provider ID: 302438

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1043673528

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN

MED CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

MARC-AURELE, KRISHELLE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 301719
Board Certified Specialty: No
UCSD MEDICAL GROUP
7910 FROST ST STE 230
SAN DIEGO, CA 92123
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952503435
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRICS

NGO, MAI

Provider ID: 302114
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1508910787
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI

Provider ID: 302113
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8974
Fax: (858) 966-4051
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1508910787
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PATEL, AARTI

Provider ID: 205865
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1871813105

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRICS

PIERCE, HEATHER

Provider ID: 205701

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5841

Fax: (858) 966-6728

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1699955542

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRICS

POLICH, MICHELLE

Provider ID: 286390

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1780118018

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRICS

RHEE, KYUNG

Provider ID: 206114

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5841

Fax: (858) 966-6728

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1013996529

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRICS

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RIES, DAVID

Provider ID: 206082

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

After Hours Phone: (858)
966-5841

Provider Gender: Male

NPI: 1376705483

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

RUNGVIVATJARUS, TIRANUN

Provider ID: 206319

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1407276363

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

SONG, RICHARD

Provider ID: 301716

Board Certified Specialty: No
UCSD MEDICAL GROUP

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881893477

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRICS

STOVER, LAURIE

Provider ID: 206196

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

After Hours Phone: (858)
966-5841

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1659442317
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRICS

SUTTNER, DENISE

Provider ID: 301721
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1457433799
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRICS

WEISS, KATHERINE

Provider ID: 301703
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1053541862
☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY

Provider ID: 287524
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
📍 7910 FROST ST STE 195
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8974
📞 After Hours Phone: (858)
966-8974
Provider Gender: Male
NPI: 1457664518
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes


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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL): N
IPA: Rady Childrens Health Network

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN


Provider ID: 287453

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858) 966-8974

Provider Gender: Female

NPI: 1366589640

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PHYSICAL MEDICINE / REHABILITATION


DALAL, PRITHA

Provider ID: 287523

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858) 966-8974

Provider Gender: Female

NPI: 1609017532

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PHYSICAL MEDICINE /


REHABILITATION

RICHARDSON, HENRY

Provider ID: 295276

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619) 325-1161

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE


Provider ID: 287520

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

NETWORK

 7910 FROST ST STE 195
SAN DIEGO, CA 92123
 Phone: (858) 966-8974
 After Hours Phone: (858)
966-8974

Provider Gender: Male


NPI: 1447645742


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 287519

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 7910 FROST ST STE 195
SAN DIEGO, CA 92123
 Phone: (858) 966-8974
 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A



IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 287537

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 7910 FROST ST STE 195
SAN DIEGO, CA 92123
 Phone: (858) 966-8974
 After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1487635272

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PHYSICIANS ASSISTANT


AINSWORTH, DELISSA

Provider ID: 243367

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):
N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284763
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 923-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
923-8273



Provider Gender: Female
NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


ARMEEN, GARY

Provider ID: 247035

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


BERGEN, SOPHEA

Provider ID: 295518

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619)
265-7912

Provider Gender: Female
NPI: 1558300665

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ALVARADO
HOSPITAL LLC, PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217649

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

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D. دليل مقدمي الخدمات المتخصصين

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE


Provider ID: 255558

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA


Provider ID: 257530


Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT


 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

Provider Gender: Female

NPI: 1376550657

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-5:30PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

PHYSICIANS ASSISTANT

DERISSI, DANA

Provider ID: 301632


Board Certified Specialty: No


RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY


SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1063829505

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR,

RADY CHILDRENS HOSPITAL


SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network

PHYSICIANS ASSISTANT

GUTH, CARA


Provider ID: 299111


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

 Phone: (858) 455-6460

 Fax: (858) 455-5362

 After Hours Phone: (858)
455-6460

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1992177182

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 4168 FRONT ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 203 W F ST
SAN DIEGO, CA 92101

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287449

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781


📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1114459765

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB


Provider ID: 298428

Board Certified Specialty: No


UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HUNTER, JACOB


Provider ID: 298430


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LAM, DAVINA


Provider ID: 295651

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 6719 ALVARADO RD STE 308

SAN DIEGO, CA 92120


 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619) 265-7912

Provider Gender: Female

NPI: 1245863737

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS

MEMORIAL HOSPITAL, GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

LAMBERT, GAGE


Provider ID: 214788


Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1144672494

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,


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D. دليل مقدمي الخدمات المتخصصين

SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


LEE, JENNIFER

Provider ID: 309998

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


LINDEMANN, CHRISTINA

Provider ID: 283760


Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (858) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194373514

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


MARTIN, HALEY

Provider ID: 305026

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280611

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1104371251

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N 🗺️ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: UCSD Medical Group</p>	<p>📍 3030 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123 ☎️ Phone: (858) 966-6789 📠 Fax: (858) 966-8519 🕒 After Hours Phone: (858) 966-6789 Provider Gender: Female NPI: 1932459179 🗺️ Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N 🗺️ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Rady Childrens Health</p>	<p>NPI: 1427312644 🗺️ Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🗺️ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group</p>
<hr/> <p>PHYSICIANS ASSISTANT</p> <p>MERRILL, COREY Provider ID: 258040 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎️ Phone: (800) 926-8273 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1386032308 🗺️ Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): Network</p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <p>NGUYEN, KHANH Provider ID: 310049 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 4520 EXECUTIVE DR SAN DIEGO, CA 92121 ☎️ Phone: (800) 926-8273 📠 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female</p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <p>NGUYEN, KHANH Provider ID: 310050 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎️ Phone: (800) 926-8273 📠 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1427312644 🗺️ Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🗺️ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group</p>
<hr/> <p>PHYSICIANS ASSISTANT</p> <p>NAKAMITSU, ABIGAIL Provider ID: 268666 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <p>NGUYEN, KHANH Provider ID: 310049 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 4520 EXECUTIVE DR SAN DIEGO, CA 92121 ☎️ Phone: (800) 926-8273 📠 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female</p>	<hr/> <p>PHYSICIANS ASSISTANT</p>

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PAUL, ROBERT

Provider ID: 307945

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Phone: (858) 571-3630

Fax: (858) 295-3948

After Hours Phone: (858)
571-3630

Provider Gender: Male

NPI: 1972811412

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293441

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8275

Fax: (888) 539-8783

After Hours Phone: (800)
926-8275

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293444

Board Certified Specialty: No
UCSD MEDICAL GROUP

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Phone: (800) 926-8278

Fax: (888) 539-8786

After Hours Phone: (800)
926-8278

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283585

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283586

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1356749451
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293246
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1639528110
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293247
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1639528110
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PRIEST, VIVIAN

Provider ID: 272430
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1225581754
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PYLE, ALEXANDRA

Provider ID: 297718
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
☎ Phone: (858) 455-6460
Fax: (858) 455-7197
🕒 After Hours Phone: (858)
455-6460
Provider Gender: Female
NPI: 1225416472
☑ Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 20\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

QUIJANO, GLENN

Provider ID: 307067
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Phone: (858) 571-3630
Fax: (858) 295-3948
After Hours Phone: (858) 571-3630
Provider Gender: Male
NPI: 1407466030

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 253253
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-7777
After Hours Phone: (619) 543-7777
Provider Gender: Female
NPI: 1265960256

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302452
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)

966-4003
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SCHMITT, EVA

Provider ID: 264176
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1174715106
Provider English Spoken: Y
Provider Language(s) Spoken: German

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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER


Provider ID: 256639

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (858) 453-1469

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780851253

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


SCHROEDER, JENNIFER

Provider ID: 256640

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780851253


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT

SCHULZ, STEFAN

Provider ID: 243419

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male


NPI: 1316102163


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


SHAUL, SHERA

Provider ID: 247974

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336659507


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305009

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124593926

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

Provider ID: 255913

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 543-7496

After Hours Phone: (619)
543-7496

Provider Gender: Female

NPI: 1972595478

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 287372

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942724042

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299598

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEBB, SHANNON

Provider ID: 305285

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

☎ Phone: (858) 750-2983

Fax: (858) 750-2984

☎ After Hours Phone: (858) 750-2983

Provider Gender: Female

NPI: 1821271685

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278200

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4168 FRONT ST

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932494499

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278201

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 330 LEWIS ST

SAN DIEGO, CA 92103

☎ Phone: (800) 925-8271

Fax: (888) 539-8781

☎ After Hours Phone: (800) 925-8271

Provider Gender: Female




NPI: 1932494499

☑ Provider English Spoken: Y




☑ Provider Language(s)

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D. دليل مقدمي الخدمات المتخصصين





Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 278203
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932494499
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group








PHYSICIANS ASSISTANT

WRIGHT, DEREK
Provider ID: 302388
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
 Phone: (619) 325-1161
Fax: (619) 325-1717
 After Hours Phone: (619)
325-1161
Provider Gender: Male
NPI: 1629674858
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA
Provider ID: 293289
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Female
NPI: 1508912130
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA
Provider ID: 293290
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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D. دليل مقدمي الخدمات المتخصصين

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 303060
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 276908
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932522778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD



MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 276909
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932522778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

PSYCHOLOGIST


ABERCROMBIE, SHERI

Provider ID: 290770
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
 810-8700

Provider Gender: Female

NPI: 1932292422

 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST


ABERCROMBIE, SHERI

Provider ID: 293400
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
 279-0925

Provider Gender: Female

NPI: 1932292422

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:30AM-4PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203173
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203174
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE
 325
 SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 304195
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST


BASS, GURGIANA

Provider ID: 306550

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1639325277


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-4:30PM

TU 8AM-0PM

W 8AM-4:30PM

TH 8AM-0PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

BASS, GURGIANA

Provider ID: 290752

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1639325277

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


PSYCHOLOGIST

CHESHER, NICHOLAS


Provider ID: 273811

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

PSYCHOLOGIST

CLEMENT, LUIS

Provider ID: 290745

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619) 234-2158

Provider Gender: Male

NPI: 1235364712

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

DIOKNO, RHODA

Provider ID: 290800

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619) 234-2158

Provider Gender: Female

NPI: 1629109483

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290773

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290954

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FORZANI, CHRISTINA

Provider ID: 290780

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619) 563-0250

Provider Gender: Female



NPI: 1902939630

Provider English Spoken: Y

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين




Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN

Provider ID: 294171
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925


Provider Gender: Female
NPI: 1376824383

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN



Provider ID: 290801
Board Certified Specialty: No



IHP OF SOUTHERN CAL-PHP
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1376824383



 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GOMEZ, JUANITA




Provider ID: 291424
Board Certified Specialty: No
UCSD MEDICAL GROUP
 6030 VILLAGE WAY
SAN DIEGO, CA 92130
 Phone: (800) 926-8372
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8372
Provider Gender: Female
NPI: 1790915759

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 296237
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1902125818

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 290792
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1902125818

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

LABIB, MICHAEL

Provider ID: 301617

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1609055797

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

LEBENSOHN CHIALVO,

FLORENCIA

Provider ID: 245225

Board Certified Specialty: No

UCSD MEDICAL GROUP

7910 FROST ST STE 350
SAN DIEGO, CA 92123

Phone: (858) 496-4800

After Hours Phone: (858)
496-4800

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

LEBENSOHN CHIALVO,

FLORENCIA

Provider ID: 245224

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273638

Board Certified Specialty: No

UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273639

Board Certified Specialty: No

UCSD MEDICAL GROUP

4910 DIRECTORS PL STE
250

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

MAGINOT-CHESHER, TAMARA

Provider ID: 273223

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 534-8019

Fax: (858) 534-6727

After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1043441165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 428-7952

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528306206

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PSYCHOLOGIST

MONTOYA, JESSICA

Provider ID: 274619

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1003421256

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

NING, GRACE

Provider ID: 296219

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

NING, GRACE

Provider ID: 290742

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 276869

Board Certified Specialty: No
UCSD MEDICAL GROUP

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922169101

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 272916

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-2827

After Hours Phone: (619)
543-2827

Provider Gender: Male

NPI: 1922169101

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

After Hours Phone: (844)
757-5337

Provider Gender: Male

NPI: 1144685215

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

PATTERSON-HYATT,

KIMBERLY

Provider ID: 290730

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1780997742

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ORFF, HENRY

Provider ID: 273009

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

Phone: (844) 757-5337

PSYCHOLOGIST

ORTIZ, MARIA

Provider ID: 290721

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497980775

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

PSYCHOLOGIST

PRINCE, RENEE

Provider ID: 303603

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 474-4008
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1467737908
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

PSYCHOLOGIST

RADOJEVIC, NATASHA
Provider ID: 290690
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL): SALO, STEPHANIE
N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

RADOJEVIC, NATASHA
Provider ID: 306574
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925

Provider Gender: Female
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

Provider ID: 307831
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250


Provider Gender: Female
NPI: 1477967784
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 17\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SHELLINGER, KRISTON
Provider ID: 213751
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (858) 246-1979
After Hours Phone: (858) 246-1979
Provider Gender: Female
NPI: 1710234273


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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD LA JOLLA JOHN
 SALLY THORNTON, UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST


SCHELLINGER, KRISTON

Provider ID: 213752

Board Certified Specialty: No
UCSD MEDICAL GROUP


 330 LEWIS ST
 SAN DIEGO, CA 92103

 Phone: (858) 246-1979

 After Hours Phone: (858)
 246-1979

Provider Gender: Female

NPI: 1710234273


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD LA JOLLA JOHN
 SALLY THORNTON, UCSD
 MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

SCHELLINGER, KRISTON


Provider ID: 213750

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE
 200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1710234273

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN

DIEGO, UCSD LA JOLLA JOHN
 SALLY THORNTON, UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303115

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
 SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1659920403

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST

TO, TUAN

Provider ID: 290285

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111



 Phone: (858) 279-0925

Fax: (858) 633-4680




 After Hours Phone: (858)



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D. دليل مقدمي الخدمات المتخصصين




279-0925
Provider Gender: Male
NPI: 1255696183
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST



TO, TUAN
Provider ID: 290284
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male
NPI: 1255696183
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST






TO, TUAN
Provider ID: 290283
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250

Provider Gender: Male
NPI: 1255696183
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TWAMLEY, ELIZABETH
Provider ID: 290717
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1501 IMPERIAL AVE

SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619)
233-8500
Provider Gender: Female
NPI: 1700089141
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

PUBLIC HEALTH PREVENTATIVE MEDICINE

SOZANSKI, JESSE
Provider ID: 200925
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1437446622
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299923


Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299924

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA


Provider ID: 238061

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES


JOSHUA, JISHA

Provider ID: 238062

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi, Malayalam
Cultural Competency: N




Hospital Affiliation: UCSD LA




JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

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D. دليل مقدمي الخدمات المتخصصين




CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 9AM-5PM
 TH 8AM-1PM
 F 9AM-6PM
 SA 8AM-11AM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 9AM-5PM
 TH 8AM-1PM
 F 9AM-6PM
 SA 8AM-11AM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP



PULMONARY DISEASES

LE, HUAN

Provider ID: 27358
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5507 EL CAJON BLVD STE
 C
 SAN DIEGO, CA 92115
 Phone: (619) 582-1448
 Fax: (619) 582-1081
 After Hours Phone: (619)
 582-1448
 Provider Gender: Male
 NPI: 1780797381
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Spanish,
 Vietnamese
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, PARADISE VALLEY
 HOSPITAL, SHARP CHULA
 VISTA MED CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\99




PULMONARY DISEASES

LE, HUAN

Provider ID: 300636
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 5507 EL CAJON BLVD STE
 C
 SAN DIEGO, CA 92115
 Phone: (619) 582-1448
 Fax: (619) 582-1081
 After Hours Phone: (619)
 582-1448
 Provider Gender: Male
 NPI: 1780797381
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Spanish,
 Vietnamese
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, PARADISE VALLEY
 HOSPITAL, SHARP CHULA
 VISTA MED CTR
 Medi-Cal Open Panel: Yes

PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299986
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1841684081
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SHARP
 MARY BIRCH HOSP FOR
 WOMEN AND NEWBORNS,
 SHARP CHULA VISTA MED CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300055
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1265896856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303100
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7901 FROST ST

SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (619) 740-8499
After Hours Phone: (858)
939-5010
Provider Gender: Male
NPI: 1275929242

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221091
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (858) 939-5021
After Hours Phone: (858)
939-5010
Provider Gender: Female

NPI: 1053348920
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 262270
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858)
649-5100
Provider Gender: Female
NPI: 1467625491
Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM
F 8AM-8PM
Website: N/A
IPA: Community Care IPA LLC,
Imperial Health Holdings
Medical Group-SD

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 254496
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858)
649-5100
Provider Gender: Female
NPI: 1467625491
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8AM-5PM
F 8AM-8PM
Website: N/A
IPA: Community Care IPA LLC,
Imperial Health Holdings
Medical Group-SD

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 269725
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858)
649-5100
Provider Gender: Male
NPI: 1962520080
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT


PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
Imperial Health Holdings
Medical Group-SD

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 262206
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858)
649-5100
Provider Gender: Male
NPI: 1962520080
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5PM




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: N/A
 IPA: Community Care IPA LLC,
 Imperial Health Holdings
 Medical Group-SD


RADIATION ONCOLOGY


TRINGALE, KATHRYN


Provider ID: 306883
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK


 9730 SUMMERS RIDGE RD
 STE 101
 SAN DIEGO, CA 92121
 Phone: (858) 345-2445
 Fax: (858) 578-1144
 After Hours Phone: (858)
 345-2445

Provider Gender: Female
 NPI: 1780172031

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A


IPA: Rady Childrens Health
 Network

RADIATION ONCOLOGY



VOLPP, PAUL

Provider ID: 221105
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 3075 HEALTH CENTER DR
 SAN DIEGO, CA 92123
 Phone: (858) 939-5010
 Fax: (858) 939-5021

 After Hours Phone: (858)
 939-5010

Provider Gender: Male
 NPI: 1225186232


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, SHARP
 CHULA VISTA MED CTR,
 GROSSMONT HOSPITAL,
 PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
 Min/Max Age: 19\100

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY


Provider ID: 304163
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 6655 ALVARADO RD
 SAN DIEGO, CA 92120

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Male
 NPI: 1033521190

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A


IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269318
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 200 W ARBOR DR
 SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Male
 NPI: 1033521190

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BRANCH, CODY


Provider ID: 283675

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 304199

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 303055

Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 304194

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): UCSD MEDICAL GROUP

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

NPI: 1427430511

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 303054

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (858) 554-1212

☎ Fax: (858) 795-1195

📞 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228

Board Certified Specialty: No

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

☎ Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


CHEWNING, RUSH

Provider ID: 301914

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8863

Fax: (858) 966-8863

 After Hours Phone: (858)
966-8863

Provider Gender: Male

NPI: 1083872212

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 299992


Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 299991


Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286954

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286956

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 201291

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 201289

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS MERCY


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY


Provider ID: 271567

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, Stanford Health

Care, STANFORD HEALTH


CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271569

Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, Stanford Health

Care, STANFORD HEALTH

CARE TRI-VALLEY


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282791

Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992120026

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282789

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992120026

Provider English Spoken: Y

Provider Language(s)
Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241853

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1598967812

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299958

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical
Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 304165

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD

SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical
Center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL


Provider ID: 299957
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1275700999


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los
Angeles General Medical
Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER



Provider ID: 271126
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1770825457

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY


THORNTON, PROVIDENCE
LITTLE CO OF MARY MED CTR

TORRANCE, PROVIDENCE
LITTLE CO OF MARY MED CTR

SAN PEDRO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER


Provider ID: 271127
Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1770825457

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY



THORNTON, PROVIDENCE
LITTLE CO OF MARY MED CTR

TORRANCE, PROVIDENCE
LITTLE CO OF MARY MED CTR

SAN PEDRO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A


IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 304167
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, PROVIDENCE

LITTLE CO OF MARY MED CTR

TORRANCE, PROVIDENCE

LITTLE CO OF MARY MED CTR

SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


KHURANA, AMAN

Provider ID: 307765

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307766


Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


KHURANA, AMAN

Provider ID: 307768

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283143

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1699125450

 Provider English Spoken: Y








Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين







Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC



KONDILI, DHIMITER
Provider ID: 283145
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699125450
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A





IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 300065
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952389934
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST MARY MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 300064
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952389934
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST MARY MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID
Provider ID: 300031
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407201916
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

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PROVIDER

 Website: N/A
IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299968
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679000806

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

SADAT, SAYED


Provider ID: 299969
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679000806


 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


SADAT, SAYED

Provider ID: 304202
Board Certified Specialty: No
UCSD MEDICAL GROUP
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679000806




 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240344
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1871910810


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240342
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)

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D. دليل مقدمي الخدمات المتخصصين

926-8273
Provider Gender: Female
NPI: 1871910810
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299948
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1134570641
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299949
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1134570641
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283312
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1851746382

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, LOMA LINDA
UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283310
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1851746382
☑ Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, LOMA LINDA
UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN


Provider ID: 303048

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303049

Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309703

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309702

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STRAKA, CHRISTOPHER

Provider ID: 276875

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1801281399

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 17\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

SWEET, JASON

Provider ID: 305028

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1326197393

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 304179

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240408

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240405

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240407

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 304150

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268546

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1306112057

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC




UNSDORFER, KYLE
Provider ID: 300034
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1285165183
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE
Provider ID: 300035
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1285165183
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 300070
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273




Provider Gender: Female

NPI: 1396700852

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 300071
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1396700852
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 283207
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 283205
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3366 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male

NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

YORK, VINCENT
Provider ID: 283519
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790146611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YORK, VINCENT
Provider ID: 283517
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790146611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW
Provider ID: 307676
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)

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D. دليل مقدمي الخدمات المتخصصين

926-8273
 Provider Gender: Male
 NPI: 1346482809
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF
 BENIOFF CHILDREN'S
 HOSPITAL OAKLAND, UCSF
 MEDICAL CENTER, UCSF
 Medical Center At Mission Bay,
 UCSF MEDICAL CENTER AT
 MOUNT ZION
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A
 IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW
 Provider ID: 307678
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 📍 200 W ARBOR DR
 SAN DIEGO, CA 92103
 📞 Phone: (800) 926-8273
 📞 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1346482809
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
 HOSPITAL OAKLAND, UCSF
 MEDICAL CENTER, UCSF
 Medical Center At Mission Bay,
 UCSF MEDICAL CENTER AT
 MOUNT ZION
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A
 IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW
 Provider ID: 307675
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 📍 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 📞 Phone: (800) 926-8273
 📞 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1346482809
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF
 BENIOFF CHILDREN'S
 HOSPITAL OAKLAND, UCSF
 MEDICAL CENTER, UCSF
 Medical Center At Mission Bay,
 UCSF MEDICAL CENTER AT
 MOUNT ZION

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A
 IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

CALLAWAY, MALLORY
 Provider ID: 287926
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 📍 4303 LA JOLLA VILLAGE
 DR STE 2110
 SAN DIEGO, CA 92122
 📞 Phone: (800) 926-8273
 Fax: (888) 539-8781
 📞 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1477207611
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER

Provider ID: 286340

Board Certified Specialty: No
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538312657

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER

Provider ID: 286339

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 471-0438
Fax: (619) 543-3763

After Hours Phone: (619)
471-0438

Provider Gender: Female

NPI: 1538312657

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE

Provider ID: 268250

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1356478929

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258298

Board Certified Specialty: No
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982120861

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

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دليل مقدمي الخدمات المتخصصين .D

AGUERO, PETER

Provider ID: 258299

Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE STE
310

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982120861

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN

Provider ID: 273381

Board Certified Specialty: No
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1669818993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN

Provider ID: 273380

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669818993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK

Provider ID: 206534

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246022

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

CORTEZ, AARON

Provider ID: 279194

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1639693187

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

COSTELLO, MARK

Provider ID: 295634

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Phone: (818) 894-2273

Fax: (818) 357-2505

After Hours Phone: (818)
894-2273

Provider Gender: Male

NPI: 1710193602

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Armenian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 5\None

American Sign Language (ASL):
N

Accessibility: CONTACT

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PROVIDER


 Website: N/A
 IPA: IHP of Southern Cal-PHP

**REGISTERED PHYSICAL
THERAPIST**

DANG, ERIC

Provider ID: 258363
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER
 LN STE 200
 SAN DIEGO, CA 92122

 Phone: (858) 543-3333
 Fax: (858) 657-1809

 After Hours Phone: (858)
 543-3333

Provider Gender: Male

NPI: 1891237756

 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

**REGISTERED PHYSICAL
THERAPIST**


DANG, KAYLEE


Provider ID: 279261

Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON
 SAN DIEGO, CA 92127

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1316426356

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
 CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


**REGISTERED PHYSICAL
THERAPIST**


FARRAR, COURTNEY

Provider ID: 303843

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC


 3434 MIDWAY DR STE 2001
 SAN DIEGO, CA 92110

 Phone: (619) 325-1161
 Fax: (619) 325-1717

 After Hours Phone: (619)
 325-1161

Provider Gender: Male

NPI: 1124577952

 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP


**REGISTERED PHYSICAL
THERAPIST**

FARRAR, COURTNEY

Provider ID: 295259

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 3434 MIDWAY DR STE 2001
 SAN DIEGO, CA 92110

 Phone: (619) 325-1161
 Fax: (619) 325-1717

 After Hours Phone: (619)
 325-1161

Provider Gender: Male

NPI: 1124577952

 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):


N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

JOHNSON, KENNADY

Provider ID: 305041
Board Certified Specialty: No
UCSD MEDICAL GROUP


 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1730834417

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER



Provider ID: 206522
Board Certified Specialty: No
UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (855) 543-0333
Fax: (858) 657-6873



 After Hours Phone: (855)
543-0333

Provider Gender: Male
NPI: 1114472230

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST


MC ELROY, CARTER


Provider ID: 206523
Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1114472230

 Provider English Spoken: Y



 Provider Language(s)
Spoken: Thai

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST

NGUYEN, HARRY

Provider ID: 271871
Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1629558499

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RICKERTS, MATTHEW

Provider ID: 287652
Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063882579

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207560

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE

Provider ID: 206547

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1386964997

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY

Provider ID: 285183

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942818505

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN

Provider ID: 302870

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4910 DIRECTORS PL
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST


WALKER, JULIE

Provider ID: 258489

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (855) 543-0333

Fax: (858) 535-6422

 After Hours Phone: (855) 543-0333

Provider Gender: Female

NPI: 1720489503

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST


WILLIAMS, STACY

Provider ID: 259683

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259684

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SLEEP MEDICINE

FINCH, CHRISTINA

Provider ID: 299938

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-7283

Fax: (888) 539-8781

 After Hours Phone: (800)
926-7283

Provider Gender: Female

NPI: 1598255325

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


SLEEP MEDICINE

FINCH, CHRISTINA


Provider ID: 299939

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1598255325

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296930

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 9655 GRANITE RIDGE DR
STE 200

SAN DIEGO, CA 92123

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS


Provider ID: 296932

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7510 CLAIREMONT MESA
BLVD STE 103

SAN DIEGO, CA 92111


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296929
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1063660165
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296920
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353

Provider Gender: Female
NPI: 1760546428
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Armenian, Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 7AM-7PM
M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296922
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111
Phone: (877) 757-8353
Fax: (818) 357-2505

After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1760546428
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Armenian, Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 7AM-9PM
M-F 7AM-9PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296921
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1760546428
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Armenian, Farsi, Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: SU 7AM-7PM
M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307883
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1073873501
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM

Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307882
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Phone: (877) 757-8353
Fax: (818) 357-2505

After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1073873501
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307885
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
8929 AERO DR STE E

SAN DIEGO, CA 92123
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1073873501
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN
Provider ID: 288937
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1164979837
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 207202

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286363

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286384

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (858) 657-7237

📞 After Hours Phone: (858)
657-7237

Provider Gender: Male

NPI: 1194983932

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI


Provider ID: 273363
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1043558653

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

SURGERY COLON SURGERY


LOPEZ, NICOLE

Provider ID: 286366


Board Certified Specialty: No
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518163005

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY COLON SURGERY


LOPEZ, NICOLE

Provider ID: 286387

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6886

 After Hours Phone: (619) 543-6886

Provider Gender: Female

NPI: 1518163005

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 286341

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA


Provider ID: 278553

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY


RAMAMOORTHY, SONIA

Provider ID: 286370

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 529-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801812656

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE


ADAMS, LAURA

Provider ID: 284407

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144616541

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


SURGERY CRITICAL CARE


POTENZA, BRUCE

Provider ID: 277298

Board Certified Specialty: No
UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-7200

 After Hours Phone: (619)
543-7200

Provider Gender: Male

NPI: 1548281496

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

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D. دليل مقدمي الخدمات المتخصصين


JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE


VENTRO, GEORGE

Provider ID: 284418

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1548604648

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL


AL-NOURI, OMAR


Provider ID: 211903

Board Certified Specialty: No

UCSD MEDICAL GROUP



 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL


ARMANI, AVA


Provider ID: 282141

Board Certified Specialty: Yes

UCSD MEDICAL GROUP


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

BARNES, RYAN

Provider ID: 299904

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7910 FROST ST STE 250

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92123
☎ Phone: (858) 565-0104
Fax: (858) 565-0194
🕒 After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1831493501
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-4:30PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

SURGERY GENERAL

BARNES, RYAN

Provider ID: 129062
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
☎ Phone: (858) 565-0104
Fax: (858) 565-0194
🕒 After Hours Phone: (858) 565-0104
Provider Gender: Male

NPI: 1831493501
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 9AM-4:30PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

SURGERY GENERAL

BENCH, SHAWN

Provider ID: 129060
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
☎ Phone: (858) 565-0104
Fax: (858) 565-0194
🕒 After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1669700753
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH 9AM-5PM
F 9AM-4PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

SURGERY GENERAL

BENCH, SHAWN

Provider ID: 299895
Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP
📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
☎ Phone: (858) 565-0104
Fax: (858) 565-0194
🕒 After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1669700753
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER
Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 9AM-5PM
F 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

SURGERY GENERAL

BERUMEN, JENNIFER

Provider ID: 260052

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8001 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1558566372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 286342

Board Certified Specialty: No
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 247073

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 201617

Board Certified Specialty: Yes
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 111

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92121
Phone: (858) 657-8860
After Hours Phone: (858) 657-8860
Provider Gender: Male
NPI: 1619252418
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 285272
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790104305
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 289164
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-8354
Fax: (858) 966-5815
After Hours Phone: (858) 966-8354
Provider Gender: Female
NPI: 1790104305
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY

THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304608
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120
Phone: (619) 500-7699
Fax: (619) 483-3997
After Hours Phone: (619) 500-7699
Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304609
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Phone: (619) 582-4490
Fax: (619) 501-9702
After Hours Phone: (619) 582-4490
Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 260842
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1407010556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286379
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-0700
After Hours Phone: (619) 471-0700
Provider Gender: Male
NPI: 1932297231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286367

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

IGNACIO, ROMEO

Provider ID: 217053

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538147145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286355

Board Certified Specialty: No

UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE

DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286356

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



D. دليل مقدمي الخدمات المتخصصين




American Sign Language (ASL): **MUELLER, GEORGE**

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

SURGERY GENERAL




JACOBSEN, GARTH




Provider ID: 201729
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121
 Phone: (858) 657-8860
 After Hours Phone: (858) 657-8860
 Provider Gender: Male
 NPI: 1265649966
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

SURGERY GENERAL

Provider ID: 300091
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123
 Phone: (858) 565-0104
 Fax: (858) 565-0194

 After Hours Phone: (858) 565-0104
 Provider Gender: Male
 NPI: 1629179684
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Vietnamese
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:30AM-5PM
 F 8:30AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP


SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 54298
 Board Certified Specialty: No
 SAN DIEGO GEN AND
 VASCULAR SURGEONS MED



GRP INC

 7910 FROST ST STE 250
 SAN DIEGO, CA 92123
 Phone: (858) 565-0104
 Fax: (858) 565-0194

 After Hours Phone: (858) 565-0104

Provider Gender: Male

NPI: 1629179684

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8:30AM-5PM
 F 8:30AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

SURGERY GENERAL

POLLACK, LARRY

Provider ID: 54346

Board Certified Specialty: Yes

SAN DIEGO GEN AND

VASCULAR SURGEONS MED

GRP INC

 7910 FROST ST STE 250
 SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (858) 565-0104

Fax: (858) 565-0194

📞 After Hours Phone: (858) 565-0104

Provider Gender: Male

NPI: 1104998400

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-5PM F 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286357

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 4303 LA JOLLA VILLAGE DR STE 2110

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1043410186

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286383

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1043410186

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272303

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033529201

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

VASCULAR

AL-NOURI, OMAR

Provider ID: 275349

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Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE
215

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275372

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE
215

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY HAND

CAGE, DORI

Provider ID: 296731

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

8008 FROST ST STE 403
SAN DIEGO, CA 92123

Phone: (858) 715-9200

Fax: (858) 715-9202

After Hours Phone: (858)
715-9200

Provider Gender: Female

NPI: 1871592253

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284934

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

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D. دليل مقدمي الخدمات المتخصصين

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL


BARBA, DAVID

Provider ID: 244087

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-5720

 After Hours Phone: (619)
543-5720

Provider Gender: Male

NPI: 1093730251

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL


BELVERUD, SHAWN

Provider ID: 202333

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1073817268

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL


BEN-HAIM, SHARONA


Provider ID: 304129

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273


 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942469663

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


SURGERY NEUROLOGICAL


HATEFI, DUSTIN

Provider ID: 310033

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1790072106
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

LEVY, MICHAEL

Provider ID: 298705
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

📍 7910 FROST ST STE 180
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8574
Fax: (858) 966-7930
🕒 After Hours Phone: (858)
966-8574

Provider Gender: Male
NPI: 1164593927

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
CHILDRENS HOSP OF LOS

ANGELES
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health
Network

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE

Provider ID: 244150
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1750306171

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242007
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1437416591

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 304170
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437416591

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244158

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

SOUMEKH, MASSOUD

Provider ID: 257468

Board Certified Specialty: Yes

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

📍 8008 FROST ST STE 401
SAN DIEGO, CA 92123

☎ Phone: (858) 560-8544

Fax: (858) 560-8546

☎ After Hours Phone: (858)
560-8544

Provider Gender: Male

NPI: 1265495014

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 9AM-4:30PM

🌐 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

SURGERY NEUROLOGICAL

TOMLIN, JEFFREY

Provider ID: 272950

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

☎ Phone: (858) 657-8540

☎ After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1366530321

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244132

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين




926-8273
Provider Gender: Male
NPI: 1164468146
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302086
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 7910 FROST ST STE 340
SAN DIEGO, CA 92123
 Phone: (858) 824-1703
Fax: (858) 455-6473
 After Hours Phone: (858)
824-1703
Provider Gender: Male
NPI: 1679726103
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE




VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262204
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
 5555 RESERVOIR DR STE
104
SAN DIEGO, CA 92120
 Phone: (619) 286-9480
Fax: (619) 286-4568
 After Hours Phone: (619)
286-9480

Provider Gender: Female
NPI: 1841447950
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Imperial Health Holdings
Medical Group-SD

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER

Provider ID: 241162
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1619231537
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC


BUKATA, SUSAN

Provider ID: 277948

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC


BUKATA, SUSAN

Provider ID: 304181

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CAMPBELL, TANNER


Provider ID: 301633

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1821593096

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network

SURGERY ORTHOPEDIC

CHENG, YU-TSUN

Provider ID: 301903


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1992982854

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN


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DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


SURGERY ORTHOPEDIC

CHIARAPPA, FRANK


Provider ID: 304174

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932536828

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284788

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC


CIDAMBI, EMILY

Provider ID: 246466

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Female


NPI: 1659634699


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 296446

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)

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D. دليل مقدمي الخدمات المتخصصين

966-8800
Provider Gender: Female
NPI: 1659634699
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 205495
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
📞 After Hours Phone: (858) 966-8800

Provider Gender: Male
NPI: 1013048412

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 260841
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
☎ Phone: (858) 966-6789
Fax: (858) 966-6706
📞 After Hours Phone: (858) 966-6789

Provider Gender: Male
NPI: 1013048412

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 203178
Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (858) 657-8200
📞 After Hours Phone: (858) 657-8200

Provider Gender: Male
NPI: 1629239140

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 304177

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284794

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

JACKSON, MADELEINE

Provider ID: 301818

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1386140085

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303196

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TWIN
CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL
CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND




HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

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D. دليل مقدمي الخدمات المتخصصين




Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


SURGERY ORTHOPEDIC

PRUSS, ERIKA




Provider ID: 303797
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-6706
 After Hours Phone: (858)
966-6789

Provider Gender: Female
NPI: 1538402441

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network


SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285247
Board Certified Specialty: No
UCSD MEDICAL GROUP




 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS


Provider ID: 304164
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260953
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
3

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92123
☎ Phone: (858) 966-6789
Fax: (858) 966-6706
🕒 After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1548417652
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR
Provider ID: 205914
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1548417652
🗣 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

BICKLER, STEPHEN
Provider ID: 270090
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (858) 966-7711
Fax: (858) 966-7712
🕒 After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1891866653
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

GOSMAN, AMANDA
Provider ID: 205841
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
📍 7920 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5999
Fax: (858) 966-4064
🕒 After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1164436291
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network


SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 272196
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK

 7920 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 966-5999
 Fax: (858) 966-4064
 After Hours Phone: (858) 966-5999


Provider Gender: Male
 NPI: 1285953364


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KELLER, BENJAMIN


Provider ID: 285941
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123

 Phone: (858) 966-7711
 Fax: (858) 966-7712

 After Hours Phone: (858) 966-7711


Provider Gender: Male
 NPI: 1285953364

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 283380
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK


 3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123

 Phone: (858) 966-7711
 Fax: (858) 966-7712

 After Hours Phone: (858) 966-7711

Provider Gender: Female
 NPI: 1982775144


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP

FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 205340
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 8110 BIRMINGHAM WAY FL 2

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92123
☎ Phone: (858) 966-7711
Fax: (858) 966-7712
📞 After Hours Phone: (858) 966-7711
Provider Gender: Female
NPI: 1982775144
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 283140
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711
Fax: (858) 966-7712
📞 After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538365002
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 205606
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711
Fax: (858) 966-7712
📞 After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538365002

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 206172
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711
Fax: (858) 966-7712
📞 After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1598979593
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


SURGERY PEDIATRIC


THANGARAJAH, HARIHARAN

Provider ID: 256194

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1598979593

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277965

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-8394

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY PLASTIC


HINCHCLIFF, KATHARINE

Provider ID: 277288


Board Certified Specialty: Yes

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

SURGERY PLASTIC


KOLB, FREDERIC

Provider ID: 246240

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246239

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255576

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7920 FROST ST STE 200

SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255575

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

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PROVIDER

🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

LEWIS, PRIYA

Provider ID: 302132
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 📍 7920 FROST ST STE 200
 SAN DIEGO, CA 92123
 📞 Phone: (858) 966-5999
 📠 Fax: (858) 966-8394
 🕒 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 NPI: 1720465024
 🗣️ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 245523
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

📍 7920 FROST ST STE 200
 SAN DIEGO, CA 92123

📞 Phone: (858) 966-5999
 📠 Fax: (858) 966-8394

🕒 After Hours Phone: (858) 966-5999

Provider Gender: Male
 NPI: 1982964276

🗣️ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 255564
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121

📞 Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1982964276

🗣️ Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 224795
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

📍 200 W ARBOR DR
 SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1982964276

🗣️ Provider English Spoken: Y
 Cultural Competency: N




Hospital Affiliation: UCSD

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group


SURGERY THORACIC

FOX, KENNETH

Provider ID: 257841
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8030
 After Hours Phone: (858) 966-8030


Provider Gender: Male
NPI: 1235153552


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


SURGERY THORACIC

GANTA, SRUJAN

Provider ID: 275611
Board Certified Specialty: No
UCSD MEDICAL GROUP


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

 After Hours Phone: (858) 966-8030

Provider Gender: Male

NPI: 1265071005

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group


SURGERY THORACIC


GANTA, SRUJAN

Provider ID: 256383

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

 After Hours Phone: (858) 966-8030

Provider Gender: Male

NPI: 1265071005


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group


SURGERY THORACIC

LEWIS, MICHAEL

Provider ID: 296906

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

Fax: (858) 966-8032

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 966-8030

Provider Gender: Male

NPI: 1780847533

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

SURGERY THORACIC

NIGRO, JOHN

Provider ID: 205367

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY STE 202

SAN DIEGO, CA 92123

☎ Phone: (858) 966-8030

Fax: (858) 966-8032

☎ After Hours Phone: (858) 966-8030

Provider Gender: Male

NPI: 1881707818

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

SURGERY THORACIC

VOSSLER, JOHN

Provider ID: 306389

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1659630572

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

TRANSPLANT SURGERY

MEKEEL, KRISTIN

Provider ID: 262109

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY STE 107

SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711

☎ After Hours Phone: (858) 966-7711

Provider Gender: Female

NPI: 1104861947

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Network

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL

Provider ID: 262192

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

200 W ARBOR DR
SAN DIEGO, CA 92123

Phone: (858) 966-8354

Fax: (858) 966-5815

After Hours Phone: (858)
966-8354

Provider Gender: Male

NPI: 1619111440

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

UROLOGY

AHMADIEH, KIAN

Provider ID: 309729

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932697190

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

UROLOGY

CHEN, TONY

Provider ID: 283960

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245684497

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

UROLOGY

KATZ, JONATHAN

Provider ID: 299918

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 274480
Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1174609127

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 256847
Board Certified Specialty: No

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1174609127

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

PATEL, DEVIN
Provider ID: 246094
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-7876
After Hours Phone: (858) 657-7876

Provider Gender: Male
NPI: 1437505559

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, CEDARS SINAI
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

UROLOGY

SWORDS, KELLY
Provider ID: 206183
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-7484
Fax: (858) 966-4064

After Hours Phone: (858) 966-7484

Provider Gender: Female
NPI: 1316101256

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

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CHILDREN'S HOSPITAL OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295833

Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

UROLOGY


UNTERBERG, STEPHEN

Provider ID: 284665

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

UROLOGY


UNTERBERG, STEPHEN

Provider ID: 295834

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284664

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

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4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Phone: (619) 297-4707
Fax: (858) 429-7927

After Hours Phone: (619)
297-4707

Provider Gender: Male

NPI: 1215374210

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

UROLOGY

WANG, LUKE

Provider ID: 299933

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

SAN MARCOS

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303448

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855
Fax: (619) 616-2104

After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 303128

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

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

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y
Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 308116

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)

Spoken: French, Italian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298658

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

BLAND, JACELIS

Provider ID: 296766

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

CABRAL, ALEJANDRA

Provider ID: 297888

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1699222620

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 296603

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM
SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA

Provider ID: 305751

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARCIA, REGINA

Provider ID: 297837

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1639673858

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HAN, ANGELA

Provider ID: 300215

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1629242839

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: JOHN
MUIR MEDICAL CENTER
WALNUT CREEK CAMPUS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KOHOUT, KATHRYN

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 291105
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1316544331

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MOONEY, PATRICIA

Provider ID: 280382

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Phone: (760) 747-8935

Fax: (760) 466-0078

After Hours Phone: (760)
747-8935

Provider Gender: Female

NPI: 1700470200

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

NGUYEN, VANESSA

Provider ID: 306716

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1376219246

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1972090306

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

VAHDAT, VALERIE

Provider ID: 294758

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

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D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (833) 867-4642

Fax: (360) 462-5827

🕒 After Hours Phone: (833) 867-4642

Provider Gender: Female

NPI: 1093474090

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY

Provider ID: 307853

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1033841861

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1407287469

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

JIMENEZ, CLARIBEL

Provider ID: 307941

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1801255484

🗨 Provider English Spoken: Y

🗨 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

DERMATOLOGY

BROWN, REGINA

Provider ID: 309982

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

☎ Phone: (760) 738-7600

Fax: (760) 738-7616


🕒 After Hours Phone: (760) 738-7600

Provider Gender: Female

NPI: 1801424692


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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


INTERNAL MEDICINE


NGUYEN, MINH

Provider ID: 308467

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078


 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1154403640

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


INTERNAL MEDICINE

TOLENTINO, ARTURO


Provider ID: 298696

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642


Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1609066018

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, LAKEWOOD
REGIONAL MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL


CARDIOLOGY

DO, HULBERT

Provider ID: 291583

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT

Provider ID: 295941

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (760) 798-8855
Fax: (619) 616-2104

🕒 After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1679733760

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245578

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855
Fax: (760) 755-5245

🕒 After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1831393289

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296052

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855
Fax: (619) 616-2104

🕒 After Hours Phone: (760)
798-8855

Provider Gender: Female

NPI: 1811307051

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 291607

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767
Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1811307051

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

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IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (619) 616-2104

After Hours Phone: (760)
798-8855

Provider Gender: Female

NPI: 1811307051

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

NEUROLOGY

ANDER, AZIZ

Provider ID: 290382

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Phone: (442) 999-5977

Fax: (442) 999-5914

After Hours Phone: (442)
999-5977

Provider Gender: Male

NPI: 1316131832

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Pashto,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

GUPTA, MONIKA

Provider ID: 307938

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1922243401

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA

VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304998

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1316471485

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS

Provider ID: 309933

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1205084183

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, MAYERS

MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM

Provider ID: 306708

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (619) 425-3842

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1881182079

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-6PM
SA 9AM-0:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIALOPEZ, JOSE

Provider ID: 295745

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1225474034

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

TEMECULA VALLEY HOSPITAL

INC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM

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 Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

CABRERA, MICHELLE

Provider ID: 303025
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1174774723

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: Adventist
Health and Rideout


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 288907

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

 120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

 Phone: (760) 740-2710

Fax: (858) 207-0003

 After Hours Phone: (760)
740-2710

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

Rady Childrens Health

Network


PEDIATRICS

LUMHO, RACHEL

Provider ID: 304047

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network


PEDIATRICS

LUMHO, RACHEL

Provider ID: 303150

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

PEDIATRICS

POSADAS, EMERITO

Provider ID: 257536
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

PEDIATRICS

QUINTERO, CAROLYN

Provider ID: 303142
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1023033156
Provider English Spoken: Y
Provider Language(s)
Spoken: Afar, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CELESTINO, MISHEL

Provider ID: 302439

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 298336
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1457903700




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT



POLLEY, SHANNON

Provider ID: 296093
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1225608722




 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-8PM
SA 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RUBIO, HALEY




Provider ID: 301290
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767

Provider Gender: Female
NPI: 1598394371





 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ALTAMIRANO, LEON

Provider ID: 290362
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
Provider Gender: Male

NPI: 1619271517



 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ARIELLA, LYNDA

Provider ID: 299716
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767

Provider Gender: Female
NPI: 1073518965

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\50
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FLYNN, DANIELLE

Provider ID: 290795

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1477785137

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GEORGIEV, MARY-JO

Provider ID: 290793

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1518996875

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

IMAM, SYED

Provider ID: 298174

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1447428271

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Urdu

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SIMPSON, ERIC

Provider ID: 290803

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1710110416

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TORRES, HECTOR

Provider ID: 290788

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069



Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين




736-6767
Provider Gender: Male
NPI: 1720265614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP




RHEUMATOLOGY

ALNAHLAWI, BASMA
Provider ID: 295532
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
 Phone: (760) 736-8091
Fax: (760) 736-8092
 After Hours Phone: (760)
736-8091
Provider Gender: Female
NPI: 1144455262
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR

MEDICAL CENTER, LOMA
LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP







RHEUMATOLOGY

ALNAHLAWI, BASMA
Provider ID: 290068
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 334 VIA VERA CRUZ STE
251
SAN MARCOS, CA 92078
 Phone: (760) 736-8091
Fax: (760) 736-8092
 After Hours Phone: (760)
736-8091
Provider Gender: Female
NPI: 1144455262
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR
MEDICAL CENTER, LOMA
LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

SAN YSIDRO

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS
Provider ID: 306684
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1114329612
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 306249

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-5305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 294925

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 297794

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 302285

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8:30AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<p>SA 8AM-2:30PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<p>IHP OF SOUTHERN CAL-PHP</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> Fax: (619) 205-6305</p> <p> After Hours Phone: (619) 662-4100</p> <p>Provider Gender: Female</p> <p>NPI: 1902197544</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>
<hr/> <p>FAMILY PRACTICE</p> <p>NAVARRO, VANESSAMARIA</p> <p>Provider ID: 297756</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 1666 PRECISION PARK LN SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> Fax: (619) 785-3384</p> <p> After Hours Phone: (619) 662-4100</p> <p>Provider Gender: Female</p> <p>NPI: 1952563421</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Filipino, Spanish, Tagalog</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<hr/> <p>FAMILY PRACTICE</p> <p>ORTEGA, LUIS</p> <p>Provider ID: 295225</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> Fax: (619) 205-6305</p> <p> After Hours Phone: (619) 662-4100</p> <p>Provider Gender: Male</p> <p>NPI: 1558924936</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8:30AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<hr/> <p>FAMILY PRACTICE GERIATRIC MEDICINE</p> <p>BULOW, KWI</p> <p>Provider ID: 302346</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> Fax: (619) 205-6305</p> <p> After Hours Phone: (619) 662-4100</p> <p>Provider Gender: Female</p> <p>NPI: 1073608576</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8:30AM-5:30PM</p>	<hr/> <p>FAMILY PRACTICE</p> <p>QURESHI, SOFIA</p> <p>Provider ID: 308756</p> <p>Board Certified Specialty: No</p>	

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Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP


GENERAL PRACTICE

SAMI, REMAN


Provider ID: 305484

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173



 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290421

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173



 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA

Provider ID: 296122

Board Certified Specialty: Yes
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD
SAN YSIDRO, CA 92173



 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1659720555

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group


OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 290490

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1316146996

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA


Provider ID: 294885

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD STE
400

SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY


GOMEZ, DANIELA

Provider ID: 294886

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-1967

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS


FUJII, CINDY

Provider ID: 298309


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1871664821

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PEDIATRICS


RODRIGUEZ, ALDO

Provider ID: 295779


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305



 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1508209651

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D. دليل مقدمي الخدمات المتخصصين



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 10AM-4PM
M 8:30AM-8PM
W-F 8:30AM-5:30PM
SA 8AM-2:30PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS







TAYLOR, TASHA

Provider ID: 290077
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1528144433
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY

MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST





IBANEZ, BERENICE

Provider ID: 290465
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1740394386
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: IHP of Southern Cal-PHP




REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN

Provider ID: 296045
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1134732522
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

LWIN, THUTHIRI

Provider ID: 307650
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)

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662-4100
 Provider Gender: Female
 NPI: 1174010896
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Burmese
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

SANTEE

PEDIATRICS

IKE, ERICA
 Provider ID: 309723
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 Phone: (619) 662-4100
 Fax: (619) 873-3476
 After Hours Phone: (619)
 662-4100
 Provider Gender: Female
 NPI: 1821413907
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST JOHNS
 MEDICAL CENTER
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN
 Provider ID: 295738
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Provider Gender: Female
 NPI: 1114041621
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: SU 10AM-4PM
 M-F 8:30AM-5:30PM
 SA 10AM-2:30PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

TEMECULA

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN
 Provider ID: 290944
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 Phone: (951) 225-6400
 Fax: (360) 462-2751
 After Hours Phone: (951)
 225-6400
 Provider Gender: Male
 NPI: 1659745610
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: TU-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN
 Provider ID: 300260
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

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D. دليل مقدمي الخدمات المتخصصين

31170 TEMECULA PKWY
STE 200

TEMECULA, CA 92592

Phone: (951) 699-3299

Fax: (951) 302-1313

After Hours Phone: (951)
699-3299

Provider Gender: Female

NPI: 1144539842

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306580

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

41840 ENTERPRISE CIR N

TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)
225-6400

Provider Gender: Female

NPI: 1093474090

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300846

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

31515 RANCHO PUEBLO
RD STE 102

TEMECULA, CA 92592

Phone: (951) 225-7873

Fax: (951) 305-9117

After Hours Phone: (951)
225-7873

Provider Gender: Female

NPI: 1588602247

Provider English Spoken: Y

Provider Language(s)

Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290633

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)
225-6400

Provider Gender: Female

NPI: 1639362494

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206759

Board Certified Specialty: No

UCSD MEDICAL GROUP

31700 TEMECULA VALLEY
PARKWAY

TEMECULA, CA 92592

Phone: (951) 303-2349

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D. دليل مقدمي الخدمات المتخصصين

Fax: (951) 303-8591
☎ After Hours Phone: (951) 303-2349
Provider Gender: Male
NPI: 1497702740
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

GUPTA, ANUJ
Provider ID: 297703
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
📍 2023 W VISTA WAY STE D VISTA, CA 92083
☎ Phone: (619) 330-8771
Fax: (619) 330-8772
☎ After Hours Phone: (619) 330-8771
Provider Gender: Male

NPI: 1073629549
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR, PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

ABELHAD, NADIA
Provider ID: 306896
Board Certified Specialty: No COMMUNITY CARE IPA LLC
📍 1000 VALE TERRACE DR VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
☎ After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619400801
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM
🌐 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

ABELHAD, NADIA
Provider ID: 306897
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
📍 1000 VALE TERRACE DR VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
☎ After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619400801
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

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

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

DO, HULBERT

Provider ID: 290574

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679733760

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

SONG, CAROL

Provider ID: 290550

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1518166685

📄 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

APRIL, MONIQUE

Provider ID: 307939

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

APRIL, MONIQUE

Provider ID: 306977

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

📄 Provider English Spoken: Y

📄 Provider Language(s)


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D. دليل مقدمي الخدمات المتخصصين

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306980

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257587

Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (844) 308-5003

Fax: (760) 414-3763

 After Hours Phone: (844)
308-5003

Provider Gender: Female

NPI: 1902120421

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM

TU 10:30AM-7:30PM

W-F 8AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE


HEALTH PLAN DIRECT


CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257586

Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1902120421

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

SA 9AM-4PM

 Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT


CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 304506

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

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D. دليل مقدمي الخدمات المتخصصين

Fax: (760) 414-3702

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1629354360

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 302526

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3702

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1629354360

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\24

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA

Provider ID: 291411

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 910 SYCAMORE AVE STE
270

VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1306978614

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301312

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679140644

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301311

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1679140644
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303932
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
☎ After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1689094971
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303928
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 517 N HORNE ST
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male
NPI: 1689094971
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303927
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male
NPI: 1689094971
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303929
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 105 DURIAN ST STE A
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
☎ After Hours Phone: (760) 631-5000

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1689094971
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 307298

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON

Provider ID: 245207

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1194027706

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 10:30AM-7:30PM

W-F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 241907

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619246907

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8PM
F 9AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304493

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304492

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 105 DURIAN ST STE A
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302296

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892


☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين


NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

Provider ID: 307931

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN


Provider ID: 307933

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298085

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network


CERTIFIED NURSE PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 298083

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y


 Provider Language(s)

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D. دليل مقدمي الخدمات المتخصصين

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network


CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET


Provider ID: 305737
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE B
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1245695006

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):  Website: N/A
IPA: UCSD Medical Group

 Accessibility: CONTACT
PROVIDER


 Website: N/A


IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA


Provider ID: 282072
Board Certified Specialty: No
UCSD MEDICAL GROUP

 910 SYCAMORE AVE STE
102
VISTA, CA 92081

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1093895047

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM


CERTIFIED NURSE PRACTITIONER

MONTGOMERY JR, KEITH


Provider ID: 295284
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Male
NPI: 1790978617


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 6\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295288
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM

W 10AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NICHOLAS, ESTELA

Provider ID: 239866

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1558384792

Provider English Spoken: Y N

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM

TU-TH 8AM-8PM

F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

PRITZKER, JOELY

Provider ID: 239773

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281857

Board Certified Specialty: No

UCSD MEDICAL GROUP

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295502

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-2PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295507

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-2PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295504

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-2PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY

Provider ID: 298837

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1033841861

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-8PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 300224
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

SA 9AM-4PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY


Provider ID: 303315

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CHIROPRACTOR

CORTEZ, JAIME

Provider ID: 290483

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1508195348

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290222

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None









American Sign Language (ASL):
N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP



CHIROPRACTOR

JU, NATHANIEL
 Provider ID: 290220
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Male
 NPI: 1972883882
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-8PM
 F 9AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY








ESKANDER, RAMEZ
 Provider ID: 282163
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE
 102
 VISTA, CA 92081
 Phone: (760) 536-7737
 Fax: (760) 536-7959
 After Hours Phone: (760)
 536-7737
 Provider Gender: Male
 NPI: 1144486929
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR, EARL AND
 LORRAINE MILLER
 CHILDRENS HSP, LONG
 BEACH MEMORIAL MED CTR,
 Providence St Joseph Hospital,
 Providence St Jude Medical
 Center, ORANGE COAST MEM
 MED CTR, FOUNTAIN VALLEY
 REGIONAL HOSP AND MED
 CTR, FOUNTAIN VALLEY
 REGIONAL HOSP AND MED
 CTR, CORONA REGIONAL
 MED CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

 Website: N/A
 IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
 Provider ID: 282128
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE
 102
 VISTA, CA 92081
 Phone: (619) 543-6397
 Fax: (888) 539-8781
 After Hours Phone: (619)
 543-6397
 Provider Gender: Female
 NPI: 1811200652
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

INFECTIOUS DISEASE

HALPERIN, JASON
 Provider ID: 296420

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1952626228

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

DAO, MARC

Provider ID: 297754

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3763

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1467542175

Provider English Spoken: Y

Provider Language(s)
Spoken: French,
Vietnamese

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, EL CENTRO
REGIONAL MEDICAL CENTER,
PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307216

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: TU 10:30AM-7:30PM
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307214

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1013963073
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, French,
 Persian
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, TRI CITY MEDICAL CTR,
 PALOMAR HEALTH, SCRIPPS
 MERCY HOSPITAL, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

INTERNAL MEDICINE

SHABANIAN, LEILA
 Provider ID: 306766
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 NPI: 1013963073
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Farsi, French,
 Persian
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, TRI CITY MEDICAL CTR,
 PALOMAR HEALTH, SCRIPPS
 MERCY HOSPITAL, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

PARKS, MONICA
 Provider ID: 302414
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 906 SYCAMORE AVE STE
 104
 VISTA, CA 92081
 Phone: (760) 630-2550
 Fax: (760) 726-2305
 After Hours Phone: (760)
 630-2550
 Provider Gender: Female
 NPI: 1740634971
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, TRI
 CITY MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP




OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS
 Provider ID: 290607
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 NPI: 1659614303
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY

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D. دليل مقدمي الخدمات المتخصصين




MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA


Provider ID: 282168
Board Certified Specialty: No
UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE
102
VISTA, CA 92081
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1174758031
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY





FRANCIS, LARRY

Provider ID: 290292
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1215008552
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SHARP MEMORIAL HOSPITAL,
POMONA VALLEY HOSP MED
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 13\None
American Sign Language (ASL):
N
 Accessibility: CONTACT




PROVIDER
Hours: M-TH 9AM-8PM
F 9AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

HAWKINS, MELISSA

Provider ID: 290596
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1851620447
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N

OBSTETRICS / GYNECOLOGY

 Accessibility: CONTACT
PROVIDER
 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

LEONARD, LISA

Provider ID: 290710

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1477588598

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-8PM
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273113

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR

VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM

F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290209

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Provider Gender: Female

NPI: 1336589332

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM

TU 9:30AM-5PM

W 8AM-5PM

TH 10AM-7PM

F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290208

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1336589332
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273114
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1336589332
☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 8AM-5PM
TU 9:30AM-5PM
W 8AM-5PM
TH 10AM-7PM
F 8AM-5PM
SA 9AM-4PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL

Provider ID: 245239
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1164546313
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-W 8AM-5PM
TH 10:30AM-7:30PM
F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290697
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1164546313
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-W 8AM-5PM
TH 10:30AM-7:30PM
F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,

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D. دليل مقدمي الخدمات المتخصصين

IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290903

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8AM-5PM
M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-8PM
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

MORA, WENDY

Provider ID: 290236

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-8PM
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

MORA, WENDY

Provider ID: 290238

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST



TAM, EMILY

Provider ID: 290316
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1497161236

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

TAM, EMILY



Provider ID: 277978
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1497161236

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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


 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

TAM, EMILY



Provider ID: 290315
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1497161236

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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


 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

TRAN, JESSICA


Provider ID: 304595
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303729

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 5\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303733

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 5\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


OPTOMETRIST

TRAN, JESSICA

Provider ID: 304596


Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


PEDIATRICS

RAHIMI, NASSRIN

Provider ID: 257581

Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1063438166

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

SA 9AM-4PM

 Website: N/A

IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT


PHYSICIANS ASSISTANT

WALLACE, STEPHANIE


Provider ID: 239770

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (888)
216-8482

Provider Gender: Female

NPI: 1518104942

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM
TU-TH 8AM-8PM

F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC


PODIATRIST

MILLER, JULIE

Provider ID: 305464

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: IHP of Southern Cal-PHP


PODIATRIST

MILLER, JULIE


Provider ID: 290666

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR, SOUTHWEST

HEALTHCARE INLAND


VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL

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D. دليل مقدمي الخدمات المتخصصين

THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248009

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2067 W VISTA WAY STE 185
VISTA, CA 92083

Phone: (760) 631-5888

Fax: (760) 631-5880

After Hours Phone: (760)
591-7750

Provider Gender: Male

NPI: 1114977535

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\None

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Hours: M 7AM-7PM

TU 7AM-5PM

W 7AM-7PM

TH 7AM-5PM

F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC

RHEUMATOLOGY

ALNAHLAWI, BASMA

Provider ID: 306869

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2095 W VISTA WAY STE 216
VISTA, CA 92083

Phone: (760) 736-8091

Fax: (760) 736-8092

After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282144

Board Certified Specialty: No

UCSD MEDICAL GROUP

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2385 S MELROSE DR
VISTA, CA 92081

Phone: (760) 300-3647

Fax: (760) 482-1316

After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 241737
Board Certified Specialty: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR WILDOMAR, CA 92595
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN
Provider ID: 287654
Board Certified Specialty: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR WILDOMAR, CA 92595
Phone: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951) 677-1111
Provider Gender: Male
NPI: 1417243239
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE, JESSICA
Provider ID: 275308
Board Certified Specialty: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR WILDOMAR, CA 92595
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164809950
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255940

Board Certified Specialty: No

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Phone: (951) 677-1111

After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1619014479

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

CHEN, KENNETH

Provider ID: 283131

Board Certified Specialty: No

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1720472657

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PATEL, SAGAR

Provider ID: 283000

Board Certified Specialty: No

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1245672302

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

TRAN, LINH

Provider ID: 202658

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Phone: (951) 677-1111

After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1851682728

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

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N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: UCSD Medical Group

WILDOMAR, CA 92595


 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951) 677-1111

Provider Gender: Male

NPI: 1144615337

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES


KUMAR, AVNEE

Provider ID: 300013

Board Certified Specialty: No

UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595


 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951) 677-1111

Provider Gender: Female

NPI: 1750745394

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283349

Board Certified Specialty: No

UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)
740-6000

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000006
NPI: 1528041811

Website: www.sharp.com/hospitals/grossmont/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)
543-4500

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

NPI: 1992880512

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)
613-4000

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000127

NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar-poway-outpatient

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)
281-5000

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000083

NPI: 1457321317

Website: www.palomarhealth.org/facilities/palomar-medical-center

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PARADISE VALLEY HOSPITAL

Provider ID: 170057

2400 E 4TH ST
NATIONAL CITY, CA 91950

Phone: (619) 470-4321

After Hours Phone: (619)
470-4321

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO








Hours: 24 Hours / 7

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

days/week
NPI: 1356410351
 Website: www.paradisevalleyhospital.net
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

RADY CHILDRENS HOSPITAL SAN DIEGO






Provider ID: 171083
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858) 576-1700
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7 days/week
NPI: 1710065933
 Website: www.rchsd.org
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


SCRIPPS GREEN HOSPITAL

Provider ID: 171084
 10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037
 Phone: (858) 455-9100
 After Hours Phone: (858)

455-9100
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO
 Hours: 24 Hours / 7 days/week
License Number: 080000139
NPI: 1841233780
 Website: www.scripps.org/locations/hospitals__scripps-green-hospital
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045
 9888 GENESEE AVE
LA JOLLA, CA 92037
 Phone: (800) 727-4777
 After Hours Phone: (800) 727-4777
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7 days/week
License Number: 080000050
NPI: 1841277704
 Website: www.scripps.org/locations/hospitals__scripps-green-hospital

s- memorial- hospital- la- jolla
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305
 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 753-6501
 After Hours Phone: (760) 753-6501
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO
 Hours: 24 Hours / 7 days/week
License Number: 080000148
NPI: 1700829199
 Website: www.scripps.org/locations/hospitals__scripps-green-hospital-encinitas
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL


Provider ID: 170048

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة


 4077 5TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 294-8111
 After Hours Phone: (619)
294-8111

Accepting New Patients: No
Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7
days/week

NPI: 1659359446

 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Birth Friendly: Y

SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256


 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
 After Hours Phone: (619)
691-7000

Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N


Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7
days/week

License Number: 090000074

NPI: 1659359446



 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SELECT SPECIALTY HOSPITAL SAN DIEGO

Provider ID: 170165


 555 WASHINGTON ST
SAN DIEGO, CA 92103
 Phone: (619) 260-8300
 After Hours Phone: (619)
260-8300

Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO


 Hours: 24 Hours / 7
days/week

License Number: 090000404

NPI: 1639172133




 Website: N/A

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

SHARP CHULA VISTA MED CTR


Provider ID: 170251

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911
 Phone: (619) 502-5800
 After Hours Phone: (619)
502-5800

Accepting New Patients: No
Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7
days/week

License Number: 090000008

NPI: 1396728630

 Website: www.sharp.com/hospitals/chula-vista/




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Birth Friendly: Y

SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252

 250 PROSPECT PL
CORONADO, CA 92118
 Phone: (619) 522-3600
 After Hours Phone: (619)
522-3600

Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1154304475

🌐 Website: www.sharp.com/hospitals/coronado/

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054

📍 3003 HEALTH CENTER DR SAN DIEGO, CA 92123

☎ Phone: (858) 939-3400

📞 After Hours Phone: (858) 939-3400

Accepting New Patients: No
Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

🕒 Hours: 24 Hours / 7 days/week

License Number: 080000039

NPI: 1407839921

🌐 Website: www.sharp.com

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

SHARP MEMORIAL HOSPITAL

Provider ID: 170047

📍 7901 FROST ST
SAN DIEGO, CA 92123

☎ Phone: (858) 939-3400

📞 After Hours Phone: (858) 939-3400

Accepting New Patients: No
Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

🕒 Hours: 24 Hours / 7 days/week

NPI: 1407839921

🌐 Website: www.sharp.com/hospitals/memorial/

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

TRI CITY MEDICAL CTR

Provider ID: 170049

📍 4002 VISTA WAY
OCEANSIDE, CA 92056

☎ Phone: (760) 724-8411

📞 After Hours Phone: (760) 724-8411

Accepting New Patients: No
Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1801861190

🌐 Website: www.tricitymed.or

g

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

Accepting New Patients: No
Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000101

NPI: 1184722779

🌐 Website: N/A

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

Accepting New Patients: No
Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

Hospital Accreditation Status:

JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000013

NPI: 1184722779

🌐 Website: N/A

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 657-7000

🕒 After Hours Phone: (858) 657-7000

Accepting New Patients: No
Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000101

NPI: 1497021265

🌐 Website: N/A

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

UCSD MEDICAL CTR

Provider ID: 170051

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (619) 543-6222

🕒 After Hours Phone: (619) 543-6222

Accepting New Patients: No

Min/Max Age: 0\None

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000101

NPI: 1184722779

🌐 Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

CARLSBAD

LA COSTA HOUSE

Provider ID: 662923

6433 FLAMENCO ST
CARLSBAD, CA 92009

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998

751 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Phone: (619) 502-3600

Fax: (619) 502-5835

After Hours Phone: (619)
502-3600

Accepting New Patients: No
NPI: 1538142369

Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SOUTH BAY POST ACUTE CARE

Provider ID: 394308

553 F ST
CHULA VISTA, CA 91910

Phone: (619) 426-8611

Fax: (619) 240-7378

After Hours Phone: (619)
426-8611

Accepting New Patients: No
Hours: M-F 9AM-5:30PM
NPI: 1376946277

Website: <http://southbaypostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Filipino, Pilipino
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CORONADO

VILLA CORONADO

CONVALESCENT

Provider ID: 172644

233 PROSPECT PL

CORONADO, CA 92118

Phone: (619) 552-3900

Fax: (619) 522-3939

After Hours Phone: (619)
552-3900

Accepting New Patients: No
NPI: 1184607418

Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985

510 E WASHINGTON AVE
EL CAJON, CA 92020

Phone: (619) 440-1211

Fax: (619) 956-3929

After Hours Phone: (619)
440-1211

Accepting New Patients: No
NPI: 1568484517


Website: www.avacadopostacute.com

Credentials and/or
certifications:







Site English Spoken: Y
Cultural Competency: N

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الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصصة (SNF) .F


American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

COTTONWOOD CANYON HEALTHCARE CENTER







Provider ID: 171983
 1391 E MADISON AVE
EL CAJON, CA 92021
 Phone: (619) 444-1107
 Fax: (619) 444-1403
 After Hours Phone: (619) 444-1107
 Accepting New Patients: No
 NPI: 1013953199
 Website: <http://cottonwoodcanyonhc.com>
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853
 1580 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 441-8745
 After Hours Phone: (619) 441-8745
 Accepting New Patients: No
 NPI: 1700973963
 Website: www.countryhills.c







om
 Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: American Sign Language, Arabic, Korean, Spanish, Tagalog, Farsi, Vietnamese, Mandarin
 Cultural Competency: N
 American Sign Language (ASL):
Y
 Accessibility: CONTACT PROVIDER

COUNTRY HILLS POST ACUTE







Provider ID: 503510
 1580 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 441-8745
 Fax: (619) 441-9029
 After Hours Phone: (619) 441-8745
 Accepting New Patients: No
 NPI: 1063974285
 Website: N/A
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

 1340 E MADISON AVE
EL CAJON, CA 92021
 Phone: (619) 447-1020
 Fax: (619) 447-1024
 After Hours Phone: (619) 447-1020
 Accepting New Patients: No
 NPI: 1346516937
 Website: N/A
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

MAGNOLIA POST ACUTE CARE

Provider ID: 380518
 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 Phone: (616) 442-8826
 Fax: (619) 442-0288
 After Hours Phone: (616) 442-8826
 Accepting New Patients: No
 NPI: 1316340227
 Website: N/A
 Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

PROVIDER

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923

444 W LEXINGTON AVE
EL CAJON, CA 92020

Phone: (619) 442-7744

After Hours Phone: (619)
442-7744

Accepting New Patients: No

NPI: 1447653340

Website: <http://parksidehealth.net>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

1201 S ORANGE AVE
EL CAJON, CA 92020

Phone: (619) 441-1988

Fax: (619) 441-7416

After Hours Phone: (619)
441-1988

Accepting New Patients: No

NPI: 1285061085

Website: <http://sdpostacute.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SOMERSET SUBACUTE AND CARE

Provider ID: 348526

151 CLAYDELLE AVE
EL CAJON, CA 92020

Phone: (619) 442-0245

Fax: (614) 423-3631

After Hours Phone: (619)
442-0245

Accepting New Patients: No

NPI: 1073916987

Website: <http://sometersubacute.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

654 S ANZA ST
EL CAJON, CA 92020

Phone: (619) 440-5005

After Hours Phone: (619)
440-5005

Accepting New Patients: No
NPI: 1326441239

Website: www.VICTORIAPOSTACUTE.com

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

654 S ANZA ST
EL CAJON, CA 92020

Phone: (619) 440-5005

After Hours Phone: (619)
440-5005

Accepting New Patients: No
NPI: 1326441239

Website: <http://victoriapostacute.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020

622 S ANZA ST

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

EL CAJON, CA 92020
Phone: (619) 442-0544
After Hours Phone: (619) 442-0544

Accepting New Patients: No
NPI: 1023048295

Website: <http://villalaspalmascares.com>
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ENCINITAS

AVIARA HEALTHCARE CENTER

Provider ID: 171995

944 REGAL RD
ENCINITAS, CA 92024
Phone: (760) 944-0331
After Hours Phone: (760) 944-0331

Accepting New Patients: No
NPI: 1518146620

Website: <http://aviarahealthcare.com>
Credentials and/or certifications:

Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977

900 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 753-6423
Fax: (760) 753-4979

After Hours Phone: (760) 753-6423

Accepting New Patients: No
Hours: M-F 8AM-5PM
NPI: 1265415749

Website: www.covenantcare.com

Credentials and/or certifications:

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER

Provider ID: 172000

211 SAXONY RD
ENCINITAS, CA 92024
Phone: (760) 632-0081
Fax: (760) 516-2016

After Hours Phone: (760) 632-0081

Accepting New Patients: No

Hours: M-F 7AM-4PM
NPI: 1659482032

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027

421 E MISSION AVE
ESCONDIDO, CA 92025
Phone: (760) 747-0430
Fax: (760) 747-0569

After Hours Phone: (760) 747-0430

Accepting New Patients: No
Hours: M-F 8AM-4:30PM
NPI: 1588660765

Website: <http://escondidopostacute.com>

Credentials and/or certifications:

Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

1980 FELICITA RD
ESCONDIDO, CA 92025

Phone: (760) 741-6109

After Hours Phone: (760) 741-6109

Accepting New Patients: No

NPI: 1386681286

Website: <http://lifecarecenterofescondido.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR HEIGHTS CARE CTR

Provider ID: 170055

1260 E OHIO AVE
ESCONDIDO, CA 92027

Phone: (760) 746-1100

After Hours Phone: (760) 746-1100

Accepting New Patients: No

NPI: 1255337440

Website: <http://palomarheightsrehab.com>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988

201 N FIG ST
ESCONDIDO, CA 92025

Phone: (760) 746-0303

Fax: (760) 738-1749

After Hours Phone: (760) 746-0303

Accepting New Patients: No

NPI: 1861491490

Website: <http://palomarvista.com>

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VALLE VISTA POST ACUTE

Provider ID: 171968

1025 W 2ND AVE
ESCONDIDO, CA 92025

Phone: (760) 745-1842

Fax: (760) 745-4346

After Hours Phone: (760) 745-1842

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1659369262

Website: www.covenantcare.com

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FALLBROOK

FALLBROOK SKILLED NURSING

Provider ID: 298744

325 POTTER ST
FALLBROOK, CA 92028

Phone: (760) 728-2330

Fax: (909) 863-4644

After Hours Phone: (760) 728-2330

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1265823264

Website: www.progressivecarecenters.com

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR
FALLBROOK, CA 92028

Phone: (760) 547-1976

Fax: (760) 721-9872

After Hours Phone: (760)
547-1976

Accepting New Patients: No

NPI: 1962488007

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

2552 TORREY PINES RD
LA JOLLA, CA 92037

Phone: (858) 453-5810

Fax: (858) 214-1212

After Hours Phone: (858)
453-5810

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1457486078

Website: www.covenantcare.com

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken: ,
Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

THE COVE AT LA JOLLA

Provider ID: 305514

7160 FAY AVE
LA JOLLA, CA 92037

Phone: (858) 459-4361

After Hours Phone: (858)
459-4361

Accepting New Patients: No

Hours: M-F 7:30AM-4PM

NPI: 1588067482

Website: <http://thecoveatljolla.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LA MESA

ARBOR HILLS NURSING CENTER

Provider ID: 172007

7800 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 460-2330

After Hours Phone: (619)
460-2330

Accepting New Patients: No

NPI: 1356345706

Website: www.lifegen.net/arborhills/

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish, Russian

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CARE MERIDIAN LA MESA

Provider ID: 173379

5640 AZTEC DR
LA MESA, CA 91942

Phone: (949) 263-6632

Fax: (619) 465-0019

After Hours Phone: (949)
263-6632

Accepting New Patients: No

NPI: 1235404674

Website: www.neurorestorative.com

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023

5696 LAKE MURRAY BLVD
LA MESA, CA 91942

Phone: (619) 460-7871

After Hours Phone: (619)
460-7871

Accepting New Patients: No
NPI: 1457345001

Website: countrymanorlamesa.com

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-4110

After Hours Phone: (619)
740-4110

Accepting New Patients: No
NPI: 1417930249

Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GROSSMONT POST ACUTE CARE

Provider ID: 310488

8787 CENTER DR
LA MESA, CA 91942

Phone: (619) 460-4444

Fax: (619) 713-5116

After Hours Phone: (619)
460-4444

Accepting New Patients: No
NPI: 1689077588

Website: <http://grossmontpostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

HILLDALE HABILITATION CENTER

Provider ID: 527671

7979 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1073736427

Website: N/A

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA MESA HEALTHCARE CTR

Provider ID: 172022

3780 MASSACHUSETTS
AVE
LA MESA, CA 91941

Phone: (619) 465-1313

Fax: (619) 465-8429

After Hours Phone: (619)
465-1313

Accepting New Patients: No
NPI: 1003852666

Website: <http://lamesahealthcare.com>

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PARKWAY HILLS NURSING & REHAB

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

Provider ID: 417047

7760 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 469-0124

Fax: (619) 828-7654

After Hours Phone: (619)
469-0124

Accepting New Patients: No

Hours: M-TH 9AM-5PM
F 5AM-5PM

NPI: 1174926448

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Farsi, Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST
LEMON GROVE, CA 91945

Phone: (619) 644-1000

Fax: (619) 797-2920

After Hours Phone: (619)
644-1000

Accepting New Patients: No

NPI: 1760709687

Website: www.bellavistahealth.com

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 463-0294

Fax: (619) 461-1064

After Hours Phone: (619)
463-0294

Accepting New Patients: No

NPI: 1336134204

Website: <http://lemongrovecare.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

541 S V AVE
NATIONAL CITY, CA 91950

Phone: (619) 791-7900

After Hours Phone: (619)

791-7900

Accepting New Patients: No

NPI: 1497759856

Website: www.lifegen.net/castlemanor/index.html
Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FRIENDSHIP MANOR NURSING AND

REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 791-7700

Fax: (619) 791-7791

After Hours Phone: (619)
791-7700

Accepting New Patients: No

Hours: M-F 9AM-5PM

NPI: 1235133687

Website: www.lifegen.net/friendshipmanor/
Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصصة (SNF)

PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

2575 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 470-6700

After Hours Phone: (619)
470-6700

Accepting New Patients: No
NPI: 1275513293

Website: <http://pvhcc.com>
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

220 E 24TH ST
NATIONAL CITY, CA 91950

Phone: (619) 474-6741

Fax: (619) 474-1925

After Hours Phone: (619)
474-6741

Accepting New Patients: No
NPI: 1730176538

Website: www.windsorcare.com
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): Accepting New Patients: No
N

Accessibility: CONTACT
PROVIDER

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OCEANSIDE

LA PALOMA HEALTHCARE CTR

Provider ID: 172021

3232 THUNDER DR
OCEANSIDE, CA 92056

Phone: (760) 724-2193

After Hours Phone: (760)
724-2193

Accepting New Patients: No
NPI: 1265462436

Website: WWW.LAPALOMAHEALTHCARE.COM
Credentials and/or

certifications:

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Armenian, Korean,
Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MICHALOWSKI HOME

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MCNEALY HOUSE

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987

12696 MONTE VISTA RD
POWAY, CA 92064

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

Phone: (858) 487-6242
Fax: (858) 487-4282

After Hours Phone: (858)
487-6242

Accepting New Patients: No

Hours: M-F 8AM-5:30PM
NPI: 1073902672

Website: [http://bouldercre
ekpa.com](http://bouldercre
ekpa.com)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY HEALTHCARE CENTER

Provider ID: 171989

15632 POMERADO RD
POWAY, CA 92064

Phone: (858) 485-5153
Fax: (858) 485-7694

After Hours Phone: (858)
485-5153

Accepting New Patients: No
NPI: 1407035512

Website: [http://powaycare.
com](http://powaycare.
com)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE VILLAS AT POWAY

Provider ID: 172642

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4545
After Hours Phone: (858)
613-4545

Accepting New Patients: No
NPI: 1619947090

Website: [www.palomarheal
th.org/skilled-nursing/villa
-pomerado](http://www.palomarheal
th.org/skilled-nursing/villa
-pomerado)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267

8885 RIO SAN DIEGO DR
STE 131

SAN DIEGO, CA 92108
Phone: (619) 293-3500
Fax: (619) 704-2054

After Hours Phone: (619)
293-3500

Accepting New Patients: No
Hours: M-F 8AM-5PM
NPI: 1083039861

Website: N/A

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ARROYO VISTA NURSING CTR

Provider ID: 172028

3022 45TH ST
SAN DIEGO, CA 92105

Phone: (619) 283-5855
Fax: (619) 284-6327

After Hours Phone: (619)
283-5855

Accepting New Patients: No

Hours: SU-SA 9AM-5PM
NPI: 1487640066

Website: [http://arroyovista
care.com](http://arroyovista
care.com)

Credentials and/or
certifications:

Site English Spoken: Y
Site Language(s) Spoken:
Mandarin, Spanish,
Vietnamese, Arabic,
Tagalog

Cultural Competency: N
American Sign Language (ASL):
N








Accessibility: CONTACT
PROVIDER

BALBOA NURSING AND REHAB CTR







Provider ID: 416840

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)




 3520 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 291-5270
 After Hours Phone: (619) 291-5270
Accepting New Patients: No
NPI: 1578521274
 Website: <http://balboahc.com>
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



BRIGHTON PLACE SAN DIEGO

Provider ID: 402624
 1350 EUCLID AVE
SAN DIEGO, CA 92105
 Phone: (619) 263-2166
 After Hours Phone: (619) 263-2166
Accepting New Patients: No
NPI: 1346258274
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT




PROVIDER

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR


Provider ID: 171971
 11895 AVENUE OF INDUSTRY
SAN DIEGO, CA 92128
 Phone: (858) 673-0101
Fax: (858) 673-8320
 After Hours Phone: (858) 673-0101
Accepting New Patients: No
NPI: 1083727093
 Website: <http://carmelmountain.net>
Credentials and/or certifications:




 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

GOLDEN HILL POST ACUTE






Provider ID: 614821
 1201 34TH ST
SAN DIEGO, CA 92102
 Phone: (619) 232-2946
Fax: (619) 702-7358
 After Hours Phone: (619) 232-2946



Accepting New Patients: No
NPI: 1598229437

 Website: N/A
Credentials and/or certifications:

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

HILLCREST HEIGHTS HEALTHCARE CENTER

Provider ID: 509489
 4033 6TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 297-4086
Fax: (619) 297-9238
 After Hours Phone: (619) 297-4086
Accepting New Patients: No
 Hours: M-F 8AM-5PM
NPI: 1558825067
 Website: N/A
Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

JACOB HEALTH CARE CENTER

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

LLC

Provider ID: 172617

4075 54TH ST
SAN DIEGO, CA 92105

Phone: (619) 582-5168

Fax: (619) 325-0194

After Hours Phone: (619)
582-5168

Accepting New Patients: No

NPI: 1881684900

Website: www.jacobhealthcare.com

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MISSION HILLS POST ACUTE CARE

Provider ID: 339053

3680 REYNARD WAY
SAN DIEGO, CA 92103

Phone: (619) 297-4484

Fax: (855) 214-6992

After Hours Phone: (619)
297-4484

Accepting New Patients: No
NPI: 1669875563

Website: [http://missionhills
postacute.com](http://missionhills
postacute.com)

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

RADY CHILDRENS

CONVALESCENT HOSPITAL

Provider ID: 172200

8022 BIRMINGHAM DR
SAN DIEGO, CA 92123

Phone: (858) 966-5833

Fax: (858) 966-8558

After Hours Phone: (858)
966-5833

Accepting New Patients: No
NPI: 1992881478

Website: www.rchsd.org
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST
SAN DIEGO, CA 92139

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)
475-2211

Accepting New Patients: No

NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ST PAULS HEALTH CARE CENTER

Provider ID: 288531

235 NUTMEG ST
SAN DIEGO, CA 92103

Phone: (619) 677-3895

After Hours Phone: (619)
677-3895

Accepting New Patients: No
NPI: 1972619104

Website: N/A
Credentials and/or
certifications: CMS

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE PAVILION AT OCEAN POINT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

Provider ID: 262151

3202 DUKE ST
SAN DIEGO, CA 92110
Phone: (619) 224-4141
After Hours Phone: (619)
224-4141

Accepting New Patients: No
NPI: 1538174990

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008

3884 NOBEL DR
SAN DIEGO, CA 92122
Phone: (858) 625-8700
Fax: (858) 625-8777

After Hours Phone: (858)
625-8700

Accepting New Patients: No
NPI: 1003198342

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

UNIVERSITY CARE CENTER

Provider ID: 172024

5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
Phone: (619) 583-1993
Fax: (619) 501-3559

After Hours Phone: (619)
583-1993

Accepting New Patients: No
NPI: 1871522672

Website: <http://universitycarecenter.com>

Credentials and/or
certifications:

Site English Spoken: Y
Site Languages(s) Spoken:
Tagalog, Mandarin,
Russian, Vietnamese, Farsi,
Spanish

Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

15720 BERNARDO CENTER
DR
SAN DIEGO, CA 92127
Phone: (858) 672-3900
Fax: (858) 672-9247

After Hours Phone: (858)
672-3900

Accepting New Patients: No

NPI: 1518063437

Website: www.villaranchobernardo.com

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

1201 34TH ST
SAN DIEGO, CA 92102
Phone: (619) 232-2946
Fax: (310) 595-3529

After Hours Phone: (619)
232-2946

Accepting New Patients: No
NPI: 1811963028

Website: <https://windsorgoldenhill.com>

Credentials and/or
certifications:

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

SAN MARCOS

CARLO HOUSE

Provider ID: 662931

411 CARLO ST
SAN MARCOS, CA 92078

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SANTEE

STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994

8778 CUYAMACA ST
SANTEE, CA 92071

Phone: (619) 449-5555

After Hours Phone: (619)
449-5555

Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1184628554

Website: www.lifegen.net/Sstanfordcourt/
Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SPRING VALLEY

AMAYA SPRINGS HEALTH CARE CENTER

Provider ID: 420233

8625 LAMAR ST
SPRING VALLEY, CA 91977

Phone: (323) 326-6186

Fax: (619) 461-3575

After Hours Phone: (323)
326-6186

Accepting New Patients: No
NPI: 1518974542

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094

9009 CAMPO RD
SPRING VALLEY, CA 91977

Phone: (619) 460-2711

After Hours Phone: (619)
460-2711

Accepting New Patients: No
NPI: 1780682021

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969

325 KEMPTON ST
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619)
931-1151

Accepting New Patients: No

Hours: SU-SA 8AM-5PM
NPI: 1649375403

Website: covlivingmountmiguel.org

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969

325 KEMPTON ST
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619)
931-1151

Accepting New Patients: No

Hours: SU-SA 8AM-5PM
NPI: 1649375403

Website: www.mountmiguelcovenantvillage.org

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VALLEY CENTER

AMREEN HOME

Provider ID: 658588

13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082

Phone: (760) 751-9879

Fax: (760) 749-3019

After Hours Phone: (760)
751-9879

Accepting New Patients: No
NPI: 1700160405

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VISTA

ANZA HOUSE

Provider ID: 662920

1736 ANZA AVE
VISTA, CA 92084

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GRACE HOUSE

Provider ID: 662919

2507 HIBISCUS AVE
VISTA, CA 92081

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No

NPI: 1962488007

Website: N/A

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA FUENTE POST ACUTE

Provider ID: 429590

247 E BOBIER DR
VISTA, CA 92084

Phone: (760) 945-3033

After Hours Phone: (760)
945-3033

Accepting New Patients: No
Hours: SU-SA 8:30AM-5PM

NPI: 1366802696

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LIFE CARE CENTER OF VISTA

Provider ID: 171970

304 N MELROSE DR
VISTA, CA 92083

Phone: (760) 724-8222

Fax: (760) 941-4870

After Hours Phone: (760)

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

724-8222

Accepting New Patients: No

🕒 Hours: SU-SA 9AM-5PM

NPI: 1811942063

🌐 Website: www.lcca.com

Credentials and/or

certifications:

📄 Site English Spoken: Y

📄 Site Language(s) Spoken:
Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

MARSHALL HOUSE

Provider ID: 662924

📍 758 S MELROSE DR
VISTA, CA 92081

📞 Phone: (760) 721-1706

Fax: (760) 721-9872

🕒 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

🌐 Website: N/A
Credentials and/or

certifications:

📄 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

MONTGOMERY HOUSE

Provider ID: 662927

📍 1658 MONTGOMERY DR
VISTA, CA 92084

📞 Phone: (760) 721-1706

Fax: (760) 721-9872

🕒 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

🌐 Website: N/A
Credentials and/or

certifications:

📄 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

ORIENTE HOUSE

Provider ID: 662928

📍 3081 ORIENTE DR
VISTA, CA 92084

📞 Phone: (760) 721-1706

Fax: (760) 721-9872

🕒 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

🌐 Website: N/A
Credentials and/or

certifications:

📄 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

SAVA HOME

Provider ID: 669500

📍 263 AHMU TER
VISTA, CA 92084

📞 Phone: (760) 305-7052

Fax: (760) 509-4949

🕒 After Hours Phone: (760)
305-7052

Accepting New Patients: No
🕒 Hours: M-F 8AM-5PM

NPI: 1962541177

🌐 Website: N/A
Credentials and/or

certifications:

📄 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

SUSAN PARHAM HOUSING CORPORATION

Provider ID: 662929

📍 1658 ANZA AVE
VISTA, CA 92084

📞 Phone: (760) 721-1706

Fax: (760) 721-9872

🕒 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1093137762

🌐 Website: N/A
Credentials and/or

certifications:

📄 Site English Spoken: Y
Cultural Competency: N


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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

American Sign Language (ASL): NPI: 1962488007

N

 Accessibility: CONTACT PROVIDER


 Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

VISTA HEALTHCARE CENTER


Provider ID: 171990


 247 E BOBIER DR
VISTA, CA 92084

 Phone: (760) 945-3033
Fax: (760) 724-3169

 After Hours Phone: (760) 945-3033

Accepting New Patients: No

 Hours: M-F 8AM-5PM
NPI: 1912189812

 Website: <http://astorhealth.com>

Credentials and/or certifications:

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

VISTA HOUSE

Provider ID: 662916

 1768 MONTE MAR RD
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706


Accepting New Patients: No

 Accessibility: CONTACT PROVIDER

VISTA KNOLL SPECIALIZED CARE FACILITY


Provider ID: 172017


 2000 WESTWOOD RD
VISTA, CA 92083

 Phone: (760) 630-2273
Fax: (760) 630-0913

 After Hours Phone: (760) 630-2273

Accepting New Patients: No

 Hours: SU-SA 8:30AM-5PM
NPI: 1275533929

 Website: <http://vistaknoll.com>

Credentials and/or certifications:

Site English Spoken: Y
 Site Languages(s) Spoken: Korean, Tagalog, Vietnamese, Spanish
Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

CHULA VISTA

OPEN ARMS ADHC

Provider ID: 417307

301 E J ST
CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619)
420-1404

Accepting New Patients: No

Hours: M-F 7AM-3PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

If Facility has completed
cultural competence training:
N

Facility has access to skilled
medical interpreters on site?: N
Interpreter Non-English
Languages: N

Website: <http://openarmsadhc.com>

EL CAJON

EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST
EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619)
328-2112

Accepting New Patients: No

Hours: SU-SA 9AM-3PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

If Facility has completed
cultural competence training:
N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English
Languages: N

Website: N/A

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619)
444-1522

Accepting New Patients: No

Hours: M-F 8AM-4PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL): Facility has access to skilled

N

Language line interpreter
services: N

If Facility has completed
cultural competence training:
N

Facility has access to skilled
medical interpreters on site?: N
Interpreter Non-English
Languages: N

Website: <http://magnoliaadhc.com>

WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 631-7222

Fax: (619) 631-9228

After Hours Phone: (619)
631-7222

Accepting New Patients: No

Site Language(s) Spoken: ,
Spanish, Arabic, Tagalog,
Farsi

Hours: M-F 7AM-3:30PM
NPI: 1821125550

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: Y

If Facility has completed
cultural competence training:
N

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

medical interpreters on site?: N
Interpreter Non-English
Languages: Y
Website: <https://westernadhc.wordpress.com/>

LA MESA

GOLDEN LIFE ADHC

Provider ID: 619502
9158 FLETCHER PKWY
LA MESA, CA 91942
Phone: (619) 357-7753
Fax: (619) 439-6038
After Hours Phone: (619) 357-7753
Accepting New Patients: No
NPI: 1093921900
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: N/A

NATIONAL CITY

HORIZON CBAS

Provider ID: 642082
1035 HARBISON AVE

NATIONAL CITY, CA 91950
Phone: (619) 474-1822
After Hours Phone: (619) 474-1822
Accepting New Patients: No
License Number: 060000582
NPI: 1396476388
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: N/A

POWAY

POWAY ADULT DAY HEALTH CARE CENTER

Provider ID: 404183
12250 CROSTHWAITE CIR
POWAY, CA 92064
Phone: (858) 748-5044
Fax: (858) 748-5405
After Hours Phone: (858) 748-5044
Accepting New Patients: No
License Number: 60000822
NPI: 1568659977
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: N/A

SAN DIEGO

CASA PACIFICA ADHCC

Provider ID: 417303
1424 30TH ST STE C
SAN DIEGO, CA 92154
Phone: (619) 424-8181
After Hours Phone: (619) 424-8181
Accepting New Patients: No
NPI: 1609920305
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار


 Website: www.casa-pacific.com

LOVING CARE ADHC

Provider ID: 419961

 2565 CAMINO DEL RIO S
STE 201

SAN DIEGO, CA 92108

 Phone: (619) 718-9777


Fax: (619) 569-2855

 After Hours Phone: (619)
718-9777

Accepting New Patients: No

 Hours: SU-SA 8:30AM-4PM

NPI: 1346455961

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

If Facility has completed
cultural competence training:
N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English


Languages: N

 Website: www.lovingcareadhca.com

SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018


 4428 CONVOY ST STE 288
SAN DIEGO, CA 92111


 Phone: (858) 244-4555

Fax: (858) 724-3302

 After Hours Phone: (858)
244-4555

Accepting New Patients: No

 Site Language(s) Spoken:
Vietnamese, Mandarin,
Spanish

 Hours: M-F 8AM-5PM

License Number: 550005837

NPI: 1396201828

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: Y

If Facility has completed
cultural competence training:
N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: Y

 Website: Sandiegofamilycircle.com

Accepting New Patients: No
License Number: 060000832

NPI: 1528271186

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N


Language line interpreter
services: N

If Facility has completed
cultural competence training:

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

 Website: www.americareadhc.com


SAN MARCOS

AMERICARE ADULT DAY HEALTH CARE CENTER


Provider ID: 420060

 340 RANCHEROS DR STE
196

SAN MARCOS, CA 92069

 Phone: (760) 682-2424

Fax: (760) 471-5104

 After Hours Phone: (760)
682-2424

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H. خدمات الدعم المنزلي في المقاطعة (IHSS)

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885


License Number: 1710308986

Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sd/c/hhsa/programs/ais/inhome_supportive_services.html

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ALPINE

KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302

NPI: 1841744208

Provider English Spoken: Y

Arabic

Cultural Competency: N

AMMAR KHALEEL

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

TORRES, RANDALL

Provider Gender: Male

License Number: PSY31823

NPI: 1871696435

Provider English Spoken: Y

Cultural Competency: N

RANDALL P TORRES

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 12\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CAMPO

CASTLEBERRY, DANI

Provider Gender: Female

License Number: LCS95022

NPI: 1053706853

Provider English Spoken: Y

Spanish

Cultural Competency: N

DANI E CASTLEBERRY

1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 478-9164

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

CHULA VISTA

BAYLON, ALDO

Provider Gender: Male

License Number: PSY29904

NPI: 1649429150

Provider English Spoken: Y

Spanish

Cultural Competency: N

ALDO BAYLON

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 14\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 *Hours: M-F 8AM-8PM
SA 8AM-4PM*

CASTLEBERRY, DANI

*Provider Gender: Female
License Number: LCS95022
NPI: 1053706853*

🗣️ *Provider English Spoken: Y*

🗣️ *Spanish*

Cultural Competency: N

DANI E CASTLEBERRY

📍 *780 BAY BLVD STE 200
CHULA VISTA, CA 91910*

☎️ *Phone: (619) 662-4100*

Fax: (619) 240-7825

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

🗣️ *Site Languages(s) Spoken:
Spanish*

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

CELAYA, PATRICIA

*Provider Gender: Female
License Number: PSY33233
NPI: 1952656902*

🗣️ *Provider English Spoken: Y*

🗣️ *Spanish*

Cultural Competency: N

PATRICIA E CELAYA

📍 *678 3RD AVE*

CHULA VISTA, CA 91910

☎️ *Phone: (619) 662-4100*

Fax: (619) 425-1184

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

🗣️ *Site Languages(s) Spoken:
Spanish*

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F 8AM-8PM
SA 8AM-4PM*

GALLO, LINDA

*Provider Gender: Female
License Number: PSY27375
NPI: 1427773621*

🗣️ *Provider English Spoken: Y*

Cultural Competency: N

LINDA C GALLO

📍 *780 BAY BLVD STE 200
CHULA VISTA, CA 91910*

☎️ *Phone: (619) 662-4100*

Fax: (619) 240-7852

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

GOULD, HILARY

*Provider Gender: Female
License Number: PSY31088
NPI: 1104297696*

🗣️ *Provider English Spoken: Y
Cultural Competency: N*

HILARY GOULD

📍 *678 3RD AVE*

CHULA VISTA, CA 91910

☎️ *Phone: (619) 662-4100*

Fax: (619) 271-0260

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

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١. دليل الصحة النفسية

🕒 *Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM*

JUAREZ, AMERICA

Provider Gender: Female

License Number: LCS92516

NPI: 1386281541

🗨️ *Provider English Spoken: Y
Cultural Competency: N*

AMERICA P JUAREZ

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ *Phone: (619) 662-4100*

Fax: (619) 425-1184

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

KURZ, TROY

Provider Gender: Male

License Number: A157190

NPI: 1154862357

🗨️ *Provider English Spoken: Y
Cultural Competency: N*

TROY L KURZ

📍 678 3RD AVE

CHULA VISTA, CA 91910

☎️ *Phone: (619) 662-4100*

Fax: (619) 425-6941

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

🗨️ *Site Language(s) Spoken:
Spanish*

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F 8AM-8PM
SA 8AM-4PM*

MALAK, LAWRENCE

Provider Gender: Male

License Number: A115345

NPI: 1467773028

🗨️ *Provider English Spoken: Y
Cultural Competency: N*

LAWRENCE T MALAK

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ *Phone: (619) 662-4100*

Fax: (619) 425-1184

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

🗨️ *Provider English Spoken: Y*

🗨️ *Spanish*

Cultural Competency: N

STEPHANIE MARTINEZ

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ *Phone: (619) 662-4100*

Fax: (619) 425-1184

🕒 *After Hours Phone: (619)
662-4100*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿️ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM*

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SHIELDS, SEBASTIAN

Provider Gender: Male

License Number: MFC124495

NPI: 1558895342

Provider English Spoken: Y
 Spanish

Cultural Competency: N

SEBASTIAN L SHIELDS

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y
Cultural Competency: N

EMILY A TROYER

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-4PM

WIJAYARATNE, IMANIE

Provider Gender: Female

License Number: PSY25044

NPI: 1932358355

Provider English Spoken: Y
Cultural Competency: N

IMANIE S WIJAYARATNE

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 245-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

EL CAJON

ARAIZA, ERNESTINA

Provider Gender: Female

License Number: PSY32549

NPI: 1568608636

Provider English Spoken: Y
Cultural Competency: N

ERNESTINA ARAIZA

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100
Fax: (619) 785-3356

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ARNOLD, REBECCA

Provider Gender: Female

License Number: MFC95778

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ا. دليل الصحة النفسية

NPI: 1225580350

☑ Provider English Spoken: Y
Cultural Competency: N

REBECCA L ARNOLD

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 270-3600

Fax: (360) 462-2746

🕒 After Hours Phone: (619)
270-3600

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☑ Site Languages(s) Spoken:
Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

ARNOLD, REBECCA

Provider Gender: Female

License Number: MFC95778

NPI: 1225580350

☑ Provider English Spoken: Y
Cultural Competency: N

REBECCA L ARNOLD

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 270-3600

Fax: (360) 462-2746

🕒 After Hours Phone: (619)
270-3600

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☑ Site Languages(s) Spoken:
Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CASEY, SHANNON

Provider Gender: Female

License Number: PSY31889

NPI: 1548873755

☑ Provider English Spoken: Y
☑ Sign Language

Cultural Competency: N

SHANNON K CASEY

📍 215 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (760) 737-6935

Fax: (760) 741-2782

🕒 After Hours Phone: (760)
737-6935

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-7PM

CASEY, SHANNON

Provider Gender: Female

License Number: PSY31889

NPI: 1548873755

☑ Provider English Spoken: Y
☑ Sign Language

Cultural Competency: N

SHANNON K CASEY

📍 215 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (760) 737-6935

Fax: (760) 741-2782

🕒 After Hours Phone: (760)
737-6935

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-7PM

CRUZ, GUADALUPE

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: LCS101900

NPI: 1649727942

Provider English Spoken: Y


Spanish

Cultural Competency: N

GUADALUPE A CRUZ

 855 E MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GUARDADO-SOTO, RAQUEL

Provider Gender: Female

License Number: PSY26883

NPI: 1194999276


Provider English Spoken: Y

Cultural Competency: N

RAQUEL GUARDADO-SOTO


 855 E MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 13\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MANUEL, FRANCESCA

Provider Gender: Female

License Number: LCS107210

NPI: 1275097081


Provider English Spoken: Y

Cultural Competency: N

FRANCESCA A MANUEL


 215 W MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 667-6125

Fax: (619) 590-9036

 After Hours Phone: (619)
667-6125

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

MAXWELL-JUNGE, MELISSA

Provider Gender: Female

License Number: LCS90791

NPI: 1275182826


Provider English Spoken: Y

Cultural Competency: N


MELISSA K MAXWELL-JUNGE

 215 W MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 667-6125

Fax: (619) 590-9036

 After Hours Phone: (619)
667-6125

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

POSTLETHWAITE,

ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915







Provider English Spoken: Y

Spanish

Cultural Competency: N



ALEJANDRA POSTLETHWAITE

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



 855 E MADISON AVE
 EL CAJON, CA 92020
 Phone: (619) 440-2751
 Fax: (858) 633-4692
 After Hours Phone: (619)
 440-2751
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


SADDA, REEM

Provider Gender: Female
 License Number: A163129
 NPI: 1871921833
 Provider English Spoken: Y
 Arabic
 Cultural Competency: N
 REEM J SADDA
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\None
 Gender Restriction: No Gender

restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

WEAVER, AMANDA

Provider Gender: Female
 License Number: MFC105361
 NPI: 1174266423
 Provider English Spoken: Y
 Cultural Competency: N
 AMANDA R WEAVER
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER






WHEELER, KIM

Provider Gender: Female
 License Number: PSY34237



NPI: 1700577434
 Provider English Spoken: Y
 Cultural Competency: N
 KIM N WHEELER
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 785-3356
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 11\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM



ENCINITAS

GARCIA, ROSEMARIE



Provider Gender: Female
 License Number: MFC123590
 NPI: 1710410980
 Provider English Spoken: Y
 Cultural Competency: N
 ROSEMARIE C GARCIA
 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767

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 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

GOMEZ, JUANITA


Provider Gender: Female
 License Number: PSY27439
 NPI: 1790915759
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N

JUANITA GOMEZ

 1505 ENCINITAS BLVD
 ENCINITAS, CA 92024
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Website: N/A


Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):



N

 Accessibility: CONTACT
 PROVIDER


LOPEZ, JOANNA

Provider Gender: Female
 License Number: MFC50381
 NPI: 1275664385

 Provider English Spoken: Y
 Cultural Competency: N
 JOANNA M LOPEZ



 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 736-6767
 Fax: (760) 736-6744

 After Hours Phone: (760)
 736-6767

 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM



ESCONDIDO

ARLINGHAUS, RENE


Provider Gender: Female
 License Number: LCS80909
 NPI: 1568973964

 Provider English Spoken: Y
 Cultural Competency: N

RENE M ARLINGHAUS

 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 Fax: (619) 662-4196


 After Hours Phone: (619)
 662-4100

 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 18\None
 Gender Restriction: No Gender
 restriction



American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM



BECERRA, GABRIEL

Provider Gender: Male
 License Number: LCS114743
 NPI: 1205313319


 Provider English Spoken: Y
 Spanish
 Cultural Competency: N

GABRIEL CELESTINO

BECERRA

 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8300
 Fax: (858) 633-4698

 After Hours Phone: (760)
 520-8300

 Website: N/A
 Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

☑ Provider English Spoken: Y
☑ Spanish

Cultural Competency: N

MARIA T BELINSKY

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100
Fax: (360) 462-2745

🕒 After Hours Phone: (760) 520-8100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

☑ Provider English Spoken: Y
☑ Spanish

Cultural Competency: N

MARIA T BELINSKY

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900
Fax: (360) 462-2748

🕒 After Hours Phone: (760) 737-6900

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

☑ Provider English Spoken: Y
☑ Spanish

Cultural Competency: N

MARIA T BELINSKY

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900
Fax: (858) 633-4693

🕒 After Hours Phone: (760) 690-5900

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 9AM-4PM
W-F 9AM-4PM

CARLTON-PENN, CORNELIA

Provider Gender: Female

License Number: PSY14310

NPI: 1891720611

☑ Provider English Spoken: Y
☑ German

Cultural Competency: N

CORNELIA J CARLTON-PENN

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340
Fax: (858) 633-4698

🕒 After Hours Phone: (760) 520-8340

🌐 Website: N/A



Accepting New Patients: Yes

Site English Spoken: Y






☑ Site Languages(s) Spoken:



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١. دليل الصحة النفسية

Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM





CHRISTENSEN, PATTI

Provider Gender: Female
License Number: LCS24129
NPI: 1245434745
 Provider English Spoken: Y
Cultural Competency: N
PATTI J CHRISTENSEN
 1002 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 741-2660
 After Hours Phone: (760) 741-2660
 Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM






DOCKERY, LEE

Provider Gender: Male
License Number: A178136
NPI: 1225526320
 Provider English Spoken: Y
Cultural Competency: N
LEE M DOCKERY
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698



 After Hours Phone: (760) 520-8300
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

ESTRADA PATINO, ANGELA

Provider Gender: Female
License Number: PSY31789
NPI: 1629339015
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
ANGELA J ESTRADA PATINO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
Fax: (360) 462-2745

 After Hours Phone: (760) 520-8100
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Language(s) Spoken: Spanish
TDD: U
Min/Max Age: 14\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

FU, KATHERINE

Provider Gender: Female
License Number: A187562
NPI: 1356877807
 Provider English Spoken: Y
Cultural Competency: N
KATHERINE FU
 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Language(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None

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ا. دليل الصحة النفسية

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

GUZZO, RICHARD

Provider Gender: Male

License Number: LCS8288

NPI: 1497898431

☑ Provider English Spoken: Y
Cultural Competency: N

RICHARD L GUZZO

📍 1002 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 741-2660

🕒 After Hours Phone: (760) 741-2660

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

HARRIS, LAURA

Provider Gender: Female

License Number: LCS18214

NPI: 1255640280

☑ Provider English Spoken: Y
Cultural Competency: N

LAURA S HARRIS

📍 1002 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 741-2660

Fax: (760) 741-2642

🕒 After Hours Phone: (760) 741-2660

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

KULKARNI, NISHAT

Provider Gender: Male

License Number: A187134

NPI: 1669034732

☑ Provider English Spoken: Y
Cultural Competency: N

NISHAT KULKARNI

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

🕒 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☑ Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270

NPI: 1578983664

☑ Provider English Spoken: Y
☑ Spanish

Cultural Competency: N

DANIEL K MAGOS

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

🕒 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

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PROVIDER

MARTINEZ, NORAYMA

Provider Gender: Female

License Number: LCS100019

NPI: 1669808267

☐ Provider English Spoken: Y

Cultural Competency: N

NORAYMA MARTINEZ

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (360) 462-2748

🕒 After Hours Phone: (760)
737-6900

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

POSTLETHWAITE,

ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

🕒 After Hours Phone: (760)
520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PRASAD, AMITHA

Provider Gender: Female

License Number: A158657

NPI: 1821436882

☐ Provider English Spoken: Y

Cultural Competency: N

AMITHA, PRASAD

📍 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9270

Fax: (760) 294-9268

🕒 After Hours Phone: (760)
294-9270

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

RIOS, SIERRA

Provider Gender: Female

License Number: LCS91970

NPI: 1942746128

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

SIERRA K RIOS

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

🕒 After Hours Phone: (760)
520-8340

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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 Hours: M-F 8AM-5PM

ROBLEDO, DAMIAN

Provider Gender: Male

License Number: LCS66152

NPI: 1376831289


 Provider English Spoken: Y

 Spanish


Cultural Competency: N

DAMIAN ROBLEDO

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7AM-7:30PM

TU 7AM-4:30PM

W 7AM-7:30PM

TH-F 7AM-4:30PM

RODARTE, GABRIEL

Provider Gender: Male

License Number: A87906

NPI: 1184649212


 Provider English Spoken: Y

 Spanish

Cultural Competency: N


GABRIEL RODARTE

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

STONE, CALVIN

Provider Gender: Male

License Number: 20A18127


NPI: 1275995870

 Provider English Spoken: Y

Cultural Competency: N

CALVIN T STONE

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

STREET, KYLE

Provider Gender: Male


License Number: 20A21304


NPI: 1457912131

 Provider English Spoken: Y

Cultural Competency: N

KYLE A STREET

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300


Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken:
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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SUOZZO, JOSEPH

Provider Gender: Male
License Number: PSY18393
NPI: 1821013228
☐ Provider English Spoken: Y
Cultural Competency: N
JOSEPH M SUOZZO

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340
Fax: (858) 633-4698

🕒 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 18\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female
License Number: PSY31075
NPI: 1932308442
☐ Provider English Spoken: Y
Cultural Competency: N
ALYSSA TEETER-WITT

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300
Fax: (858) 633-4698

🕒 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female
License Number: PSY31075
NPI: 1932308442
☐ Provider English Spoken: Y
Cultural Competency: N
ALYSSA TEETER-WITT

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900
Fax: (858) 633-4693

🕒 After Hours Phone: (760) 690-5900

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

THOMAS, PAULA

Provider Gender: Female
License Number: LCS29517
NPI: 1821389966

☐ Provider English Spoken: Y
Cultural Competency: N
PAULA M THOMAS

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340
Fax: (360) 462-2752

🕒 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish, German, French, Cappadocian Greek, Hindi
TDD: U

Min/Max Age: 18\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female
License Number: PSY9962
NPI: 1710902143

☐ Provider English Spoken: Y
☐ German, Spanish

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Cultural Competency: N

ANDREA VALLEZ-BARLAM

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (858) 633-4693

After Hours Phone: (760)
466-9800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
German, Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

VAQUERO, JUANA

Provider Gender: Female

License Number: PSY28364

NPI: 1023459708

Provider English Spoken: Y

Spanish

Cultural Competency: N

JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

VENNAM, VAMSIKRISHNA

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

Provider English Spoken: Y
Cultural Competency: N

VAMSIKRISHNA K VENNAM

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER

Provider Gender: Female

License Number: PSY26963

NPI: 1639362494

Provider English Spoken: Y
Cultural Competency: N

JENNIFER WOODWORTH

425 N DATE ST
ESCONDIDO, CA 92025

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☎ Phone: (760) 520-8340
 Fax: (858) 633-4698
 📞 After Hours Phone: (760) 520-8340
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

FALLBROOK

GILROY, LAURA

Provider Gender: Female
 License Number: LCS27123
 NPI: 1437427978
 ☐ Provider English Spoken: Y
 ☐ Spanish
 Cultural Competency: N
 LAURA L GILROY
 📍 1328 S MISSION RD
 FALLBROOK, CA 92028
 ☎ Phone: (760) 451-4720
 Fax: (760) 457-4700
 📞 After Hours Phone: (760) 451-4720
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 7\None
 Gender Restriction: No Gender

restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

MAGEE, ANNA

Provider Gender: Female
 License Number: LCS107407
 NPI: 1194234609
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 ANNA M MAGEE
 📍 1328 S MISSION RD
 FALLBROOK, CA 92028
 ☎ Phone: (760) 451-4720
 Fax: (760) 457-4700
 📞 After Hours Phone: (760) 451-4720
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 5\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

MCAULEY, ROBERT


Provider Gender: Male
 License Number: G23317
 NPI: 1194881888

☐ Provider English Spoken: Y
 Cultural Competency: N
 ROBERT A MCAULEY
 📍 1328 S MISSION RD
 FALLBROOK, CA 92028
 ☎ Phone: (760) 451-4730
 Fax: (760) 457-4700
 📞 After Hours Phone: (760) 451-4730
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 12\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER



MILES, RENEE


Provider Gender: Female
 License Number: LCS70204
 NPI: 1053763623
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 RENEE S MILES
 📍 1328 S MISSION RD
 FALLBROOK, CA 92028
 ☎ Phone: (760) 451-4720
 Fax: (760) 457-4700
 📞 After Hours Phone: (760) 451-4720
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y

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TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER








RODARTE, GABRIEL

Provider Gender: Male
 License Number: A87906
 NPI: 1184649212
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 GABRIEL RODARTE
 1328 S MISSION RD
 FALLBROOK, CA 92028
 Phone: (760) 541-4730
 Fax: (760) 457-4700
 After Hours Phone: (760) 541-4730
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



IMPERIAL BEACH





GONZALEZ, CLAUDIA

Provider Gender: Female
 License Number: LCS100328
 NPI: 1770055543
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 CLAUDIA GONZALEZ
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER







LA JOLLA

BAILIS, JESSICA

Provider Gender: Female
 License Number: PSY27537
 NPI: 1760739049
 Provider English Spoken: Y
 Cultural Competency: N
 JESSICA R BAILIS
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037


 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

BOOTH, CHRISTOPHER

Provider Gender: Male
 License Number: PSY26073
 NPI: 1568893162
 Provider English Spoken: Y
 Cultural Competency: N
 CHRISTOPHER R BOOTH
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT

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PROVIDER


 Hours: M-F 8AM-5PM

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162


 Provider English Spoken: Y


Cultural Competency: N

CHRISTOPHER R BOOTH

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906

 Provider English Spoken: Y


Cultural Competency: N


KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR

STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906


 Provider English Spoken: Y


Cultural Competency: N


KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

 After Hours Phone: (858)
246-1654

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823


NPI: 1780620906

 Provider English Spoken: Y

Cultural Competency: N

KERRI N BOUTELLE

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHESHER, NICHOLAS








Provider Gender: Male

License Number: PSY29290







NPI: 1124539697


 Provider English Spoken: Y

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Cultural Competency: N
NICHOLAS J CHESHER
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

CRANDAL, BRENT






Provider Gender: Male
License Number: PSY26294
NPI: 1588739452
 *Provider English Spoken: Y*
Cultural Competency: N
BRENT R CRANDAL
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Phone: (800) 926-8372
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8372
 Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

DUARTE, KRISTEN

Provider Gender: Female
License Number: PSY31227
NPI: 1093119364
 *Provider English Spoken: Y*
Cultural Competency: N
KRISTEN L DUARTE
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Website: N/A
Accepting New Patients: Yes

EICHEN, DAWN

Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
 *Provider English Spoken: Y*
Cultural Competency: N
DAWN M EICHEN
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)

DUARTE, KRISTEN


Provider Gender: Female

License Number: PSY31227
NPI: 1093119364
 *Provider English Spoken: Y*
Cultural Competency: N
KRISTEN L DUARTE
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

EICHEN, DAWN

Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
 *Provider English Spoken: Y*
Cultural Competency: N
DAWN M EICHEN
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)


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926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


EICHEN, DAWN

Provider Gender: Female
 License Number: PSY27823
 NPI: 1861043366


 Provider English Spoken: Y
 Cultural Competency: N

DAWN M EICHEN

 8950 VILLA LA JOLLA DR
 STE C212
 LA JOLLA, CA 92037

 Phone: (858) 246-1654
 Fax: (858) 246-3181

 After Hours Phone: (858)
 246-1654

 Website: N/A


Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


EICHEN, DAWN

Provider Gender: Female
 License Number: PSY27823
 NPI: 1861043366


 Provider English Spoken: Y
 Cultural Competency: N

DAWN M EICHEN

 3344 N TORREY PINES CT
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

ELLEDDGE, LINDSAY

Provider Gender: Female
 License Number: LCS96136
 NPI: 1619428828


 Provider English Spoken: Y
 Cultural Competency: N


LINDSAY E ELLEDGE

 8950 VILLA LA JOLLA DR

STE 101

LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


FINN, DAPHNA

Provider Gender: Female
 License Number: A152291
 NPI: 1639522725

 Provider English Spoken: Y
 Cultural Competency: N

DAPHNA M FINN

 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None

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Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

HUEGE, STEVEN

Provider Gender: Male

License Number: C141122

NPI: 1598716367

Provider English Spoken: Y Cultural Competency: N

STEVEN F HUEGE

8950 VILLA LA JOLLA DR STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

HUEGE, STEVEN

Provider Gender: Male

License Number: C141122

NPI: 1598716367

Provider English Spoken: Y Cultural Competency: N

STEVEN F HUEGE

9444 MEDICAL CENTER DR LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119

Provider English Spoken: Y Arabic Cultural Competency: N

MOHAMAD H KHAFAJA

8950 VILLA LA JOLLA DR STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

LASSWELL, EVE

Provider Gender: Female

License Number: PSY30220

NPI: 1013483635

Provider English Spoken: Y Cultural Competency: N

EVE N LASSWELL

8950 VILLA LA JOLLA DR STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes Site English Spoken: Y


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

LEDBETTER, ALEX

Provider Gender: Male

License Number: 20A20454


NPI: 1073017315


 *Provider English Spoken: Y*
Cultural Competency: N

ALEX W LEDBETTER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

LEE, DAVID

Provider Gender: Male

License Number: A124329

NPI: 1871884130

 *Provider English Spoken: Y*


 *Korean*


Cultural Competency: N


DAVID J LEE

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

LI, XIA

Provider Gender: Female

License Number: A163344

NPI: 1336670413

 *Provider English Spoken: Y*


 *Mandarin*

Cultural Competency: N

XIA LI


 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

LINKE, SARAH

Provider Gender: Female


License Number: PSY27116

NPI: 1487026415

 *Provider English Spoken: Y*
Cultural Competency: N

SARAH E LINKE

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

MAGINOT-CHESHER, TAMARA

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

١. دليل الصحة النفسية


License Number: PSY28678

NPI: 1043441165


 Provider English Spoken: Y
Cultural Competency: N

TAMARA R MAGINOT
CHESHER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 534-7792

Fax: (619) 471-9017

 After Hours Phone: (858)
534-7792

 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

MAXWELL, BENJAMIN

Provider Gender: Male


License Number: A108124

NPI: 1740415926


 Provider English Spoken: Y
Cultural Competency: N


BENJAMIN K MAXWELL

 8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (858) 534-8019

Fax: (858) 534-6727

 After Hours Phone: (858)
534-8019

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

MENDEZ, ANDRES

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

ANDRES G MENDEZ

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

 Provider English Spoken: Y

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Cultural Competency: N

SHAVON C MOORE

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 826-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
826-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

🗣 Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

🗣 Provider English Spoken: Y

🗣 Vietnamese

Cultural Competency: N

HOANG A NGUYEN

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

🗣 Provider English Spoken: Y

🗣 Vietnamese

Cultural Competency: N

HOANG A NGUYEN

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (619) 497-6673

📞 After Hours Phone: (619)
497-6673

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PELHAM, WILLIAM

Provider Gender: Male

License Number: PSY33091

NPI: 1306629399

🗣 Provider English Spoken: Y




Cultural Competency: N


WILLIAM E PELHAM

📍 8950 VILLA LA JOLLA DR
STE C101



LA JOLLA, CA 92037



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 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U



Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

QAYOUMI, WALI



Provider Gender: Male
 License Number: A168429
 NPI: 1093178220
 Provider English Spoken: Y
 French
 Cultural Competency: N
 WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
 LA JOLLA, CA 92093
 Phone: (858) 822-5881
 Fax: (888) 539-8781
 After Hours Phone: (858) 822-5881
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction



American Sign Language (ASL): NPI: 1679869556
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

QAYOUMI, WALI


Provider Gender: Male
 License Number: A168429
 NPI: 1093178220
 Provider English Spoken: Y
 French
 Cultural Competency: N
 WALI Z QAYOUMI


 9350 CAMPUS POINT DR STE LLB
 LA JOLLA, CA 92037
 Phone: (619) 284-3746
 Fax: (888) 579-8781
 After Hours Phone: (619) 284-3746
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U


Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

REED, KRISTIE


Provider Gender: Female
 License Number: PSY30934

 Provider English Spoken: Y
 Cultural Competency: N
 KRISTIE L REED

 8950 VILLA LA JOLLA DR STE C212
 LA JOLLA, CA 92037

 Phone: (800) 926-8372
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8372


 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

REED, KRISTIE

Provider Gender: Female
 License Number: PSY30934
 NPI: 1679869556

 Provider English Spoken: Y
 Cultural Competency: N
 KRISTIE L REED

 3344 N TORREY PINES CT
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

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Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934


 Provider English Spoken: Y
Cultural Competency: N

MARLA G RICHARD

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

RICHARD, MARLA

Provider Gender: Female


License Number: G65188


NPI: 1578720934

 Provider English Spoken: Y
Cultural Competency: N

MARLA G RICHARD

 9300 MEDIAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SCHNEEBERGER, ANDRES

Provider Gender: Male

License Number: C175502

NPI: 1184867376

 Provider English Spoken: Y
Cultural Competency: N

ANDRES R SCHNEEBERGER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155


NPI: 1659920403

 Provider English Spoken: Y
Cultural Competency: N

STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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 *Accessibility: CONTACT PROVIDER*

TARVER, LESLIE


*Provider Gender: Female
License Number: A169181
NPI: 1811300957*

 *Provider English Spoken: Y
Cultural Competency: N*

LESLIE B TARVER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

THOMAS, KELSEY

*Provider Gender: Female
License Number: PSY29738
NPI: 1700264264*


 *Provider English Spoken: Y
Cultural Competency: N*

KELSEY R THOMAS


 8950 VILLA LA JOLLA DR


STE 101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*


WISHNEK, HANNAH

*Provider Gender: Female
License Number: LCS105699
NPI: 1578012043*

 *Provider English Spoken: Y
Cultural Competency: N*


HANNAH K WISHNEK

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

ZLATAR, ZVINKA

*Provider Gender: Female
License Number: PSY26230
NPI: 1497139059*


 *Provider English Spoken: Y*

 *Spanish*

Cultural Competency: N

ZVINKA Z ZLATAR

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM*

LAKESIDE


BRUNETTO, HEIDI

*Provider Gender: Female
License Number: PSY26809*


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ا. دليل الصحة النفسية

NPI: 1023250453

 Provider English Spoken: Y
Cultural Competency: N

HEIDI M BRUNETTO

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 390-9975
Fax: (360) 462-2744

 After Hours Phone: (619)
390-9975

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-5PM

NATIONAL CITY

CHOI, MIN

Provider Gender: Female


License Number: MFC135952

NPI: 1871195107

 Provider English Spoken: Y
Cultural Competency: N

MIN H CHOI

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 356-2726

 After Hours Phone: (844)
200-2426

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM

FLANIGAN, MARILYN

Provider Gender: Female


License Number: MFC97326


NPI: 1588996912

 Provider English Spoken: Y
Cultural Competency: N

MARILYN Y FLANIGAN

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F 8AM-6PM

KUGEL, SAMUEL

Provider Gender: Male


License Number: A54412

NPI: 1497813968

 Provider English Spoken: Y
 Portuguese, Spanish
Cultural Competency: N

SAMUEL KUGEL

 502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950

 Phone: (619) 472-2600
Fax: (619) 472-5721

 After Hours Phone: (619)
472-2600

 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

 Site Language(s) Spoken:
Spanish, Portuguese


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

LAD, NIKISHA

Provider Gender: Female

License Number: LCS120676

NPI: 1942857107

 Provider English Spoken: Y
Cultural Competency: N

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NIKISHA J LAD

📍 2400 E 8TH ST
NATIONAL CITY, CA 91950
☎ Phone: (619) 662-4100
☎ Fax: (619) 259-2807
🕒 After Hours Phone: (619)
662-4100
🌐 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 8AM-5PM
M-F 8AM-5PM

SACHS, MELISSA

Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
📄 Provider English Spoken: Y
Cultural Competency: N

MELISSA R SACHS

📍 2400 E 8TH ST
NATIONAL CITY, CA 91950
☎ Phone: (619) 662-4100
☎ Fax: (619) 259-2807
🕒 After Hours Phone: (619)
662-4100
🌐 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y

TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

SILVEY, CHRISTOPHER

Provider Gender: Male
License Number: LCS85942
NPI: 1932793502
📄 Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER J SILVEY

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
☎ Fax: (619) 474-4008
🕒 After Hours Phone: (844)
200-2426
🌐 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

SIMMONS, ROBERT

Provider Gender: Male
License Number: LCS117787
NPI: 1689269631
📄 Provider English Spoken: Y
Cultural Competency: N
ROBERT M SIMMONS
📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
☎ Fax: (619) 434-9853
🕒 After Hours Phone: (844)
200-2426
🌐 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH 8AM-6PM
F 8AM-5PM

OCEANSIDE

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
📄 Provider English Spoken: Y
📄 Spanish
Cultural Competency: N
AZUCENA ACOSTA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N

AZUCENA ACOSTA
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N

AZUCENA ACOSTA
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL








818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 5\80
Gender Restriction: No Gender restriction
American Sign Language (ASL): N






Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

BELL, JENNIFER



Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y





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Cultural Competency: N
JENNIFER L BELL
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 5\80
*Gender Restriction: No Gender
 restriction*
*American Sign Language (ASL):
 N*
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM









BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
 Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Chinese, Farsi
 TDD: U
 Min/Max Age: 5\80
*Gender Restriction: No Gender
 restriction*
*American Sign Language (ASL):
 N*
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM

CHALMERS, VIRGINIA
Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
VIRGINIA C CHALMERS

 619 CROUCH ST
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
*Gender Restriction: No Gender
 restriction*
American Sign Language (ASL):



N
 Accessibility: CONTACT
 PROVIDER

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
*Gender Restriction: No Gender
 restriction*
*American Sign Language (ASL):
 N*
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ا. دليل الصحة النفسية

 *Provider English Spoken: Y*
 *Spanish*

Cultural Competency: N

WARREN R CHRISTIANSON II

 4700 N RIVER RD
 OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM*

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


 *Provider English Spoken: Y*

 *Spanish*

Cultural Competency: N

WARREN R CHRISTIANSON II

 818 PIER VIEW WAY
 OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*

631-5000

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM*

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


 *Provider English Spoken: Y*

 *Spanish*

Cultural Competency: N

WARREN R CHRISTIANSON II

 517 N HORNE ST
 OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM*

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


 *Provider English Spoken: Y*

 *Spanish*

Cultural Competency: N

WARREN R CHRISTIANSON II

 818 PIER VIEW WAY
 OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM*

CHRISTIANSON, WARREN

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Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM

COOK, SHERYL

Provider Gender: Female
License Number: PSY15449
NPI: 1750420816
 Provider English Spoken: Y
Cultural Competency: N
SHERYL G COOK
 619 CROUCH ST STE 100
OCEANSIDE, CA 92054

Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 9AM-6:15PM
W 9AM-6PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
 Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM

CRUZ, VANESSA
Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
 Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM

restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CRUZ, VANESSA


Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
 Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NPI: 1285170662

 Provider English Spoken: Y
Cultural Competency: N

VANESSA Y CRUZ

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female


License Number: LCS87166

NPI: 1285170662

 Provider English Spoken: Y
Cultural Competency: N


VANESSA Y CRUZ

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)

631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female


License Number: LCS26686


NPI: 1003194960


 Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female


License Number: LCS26686

NPI: 1003194960

 Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female


License Number: LCS26686

NPI: 1003194960

 Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ *After Hours Phone: (760) 631-5000*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 8AM-4PM*

JENSEN, BRIAN

Provider Gender: Male

License Number: PSY26041

NPI: 1518138049

🗨 *Provider English Spoken: Y*
Cultural Competency: N

BRIAN M JENSEN

📍 619 CROUCH ST
OCEANSIDE, CA 92054

☎ *Phone: (760) 736-6767*

Fax: (760) 736-6744

☎ *After Hours Phone: (760) 736-6767*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

KRAPES, MICHAEL

Provider Gender: Male

License Number: PSY25077

NPI: 1215233028

🗨 *Provider English Spoken: Y*
Cultural Competency: N

MICHAEL B KRAPES

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054

☎ *Phone: (760) 736-6767*

Fax: (760) 736-6744

☎ *After Hours Phone: (760) 736-6767*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

🗨 *Provider English Spoken: Y*
Spanish

Cultural Competency: N

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ *Phone: (760) 631-5000*

Fax: (760) 414-3892

☎ *After Hours Phone: (760) 631-5000*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

🗨 *Provider English Spoken: Y*
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ *Phone: (760) 631-5000*

Fax: (760) 414-3892

☎ *After Hours Phone: (760) 631-5000*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

MELENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

☑ Provider English Spoken: Y

☑ Spanish

Cultural Competency: N

ADRIANA J MELENDEZ

📍 4700 N RIVER RD

OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

☑ Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

📍 517 N HORNE ST

OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

☑ Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

📍 818 PIER VIEW WAY

OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

☑ Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

📍 4700 N RIVER RD

OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER


MONTEZ, REBECCA

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: LCS26869

NPI: 1396047809


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

REBECCA MONTEZ

 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

 Provider English Spoken: Y

Cultural Competency: N


MARGARET R NEVILLE

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

 Provider English Spoken: Y


Cultural Competency: N

MARGARET R NEVILLE

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

 Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ORTIZ, BEVERLY

Provider Gender: Female

License Number: MFC121355


NPI: 1760826572

 Provider English Spoken: Y

Cultural Competency: N

BEVERLY L ORTIZ

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

736-6767
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PATEL, MITESH

Provider Gender: Male
 License Number: A181164
 NPI: 1568880292

Provider English Spoken: Y
 Cultural Competency: N
 MITESH K PATEL

818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 SA 9AM-4PM

PATEL, MITESH

Provider Gender: Male
 License Number: A181164
 NPI: 1568880292

Provider English Spoken: Y
 Cultural Competency: N
 MITESH K PATEL

517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 SA 9AM-4PM

PATEL, MITESH

Provider Gender: Male
 License Number: A181164
 NPI: 1568880292

Provider English Spoken: Y
 Cultural Competency: N
 MITESH K PATEL

4700 N RIVER RD
 OCEANSIDE, CA 92057

Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 SA 9AM-4PM

SANCHEZ, ADRIANA

Provider Gender: Female
 License Number: LCS97093
 NPI: 1609450451

Provider English Spoken: Y
 Spanish
 Cultural Competency: N



ADRIANA SANCHEZ

4700 N RIVER RD
 OCEANSIDE, CA 92057






Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760)

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631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

SANCHEZ, ADRIANA


Provider Gender: Female
 License Number: LCS97093
 NPI: 1609450451
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 ADRIANA SANCHEZ
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT






PROVIDER

SANCHEZ, ADRIANA





Provider Gender: Female
 License Number: LCS97093
 NPI: 1609450451
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 ADRIANA SANCHEZ
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-4PM

SLOAN, CRISTINA

Provider Gender: Female
 License Number: MFC137279
 NPI: 1912456377
 Provider English Spoken: Y
 Cultural Competency: N
 CRISTINA I SLOAN
 4700 N RIVER RD

OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

SLOAN, CRISTINA

Provider Gender: Female
 License Number: MFC137279
 NPI: 1912456377
 Provider English Spoken: Y
 Cultural Competency: N
 CRISTINA I SLOAN
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

Provider English Spoken: Y
Cultural Competency: N

CRISTINA I SLOAN

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y

Spanish

Cultural Competency: N

SONYA L SMITH

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y

Spanish

Cultural Competency: N

SONYA L SMITH

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y

Spanish

Cultural Competency: N

SONYA L SMITH

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes



Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction





اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL):  818 PIER VIEW WAY
N
 Accessibility: CONTACT PROVIDER



WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
 Provider English Spoken: Y
Cultural Competency: N


CARLENE WILSON




 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A


Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):  517 N HORNE ST
N
 Accessibility: CONTACT PROVIDER



WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
 Provider English Spoken: Y
Cultural Competency: N
CARLENE WILSON


 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000




 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):  N
 Accessibility: CONTACT PROVIDER

WILSON, CARLENE



Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
 Provider English Spoken: Y
Cultural Competency: N
CARLENE WILSON

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U


Min/Max Age: 0\None
Gender Restriction: No Gender



restriction

American Sign Language (ASL):  N
 Accessibility: CONTACT PROVIDER


POWAY


KULKARNI, NISHAT

Provider Gender: Male
License Number: A187134
NPI: 1669034732
 Provider English Spoken: Y
Cultural Competency: N
NISHAT KULKARNI

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
Fax: (360) 462-2742

 After Hours Phone: (858) 218-3000


 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y

 Site Language(s) Spoken: Spanish
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

MODHWADIA, MAMTA

Provider Gender: Female

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١. دليل الصحة النفسية

License Number: A113990

NPI: 1043353667

Provider English Spoken: Y

German, Gujarati

Cultural Competency: N

MAMTA D MODHWADIA

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 16\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

POSTLETHWAITE,

ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915

Provider English Spoken: Y

Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304

NPI: 1457912131

Provider English Spoken: Y
Cultural Competency: N

KYLE A STREET

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

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SAN DIEGO

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536

NPI: 1932292422

☐ Provider English Spoken: Y

Cultural Competency: N

SHERI ABERCROMBIE

📍 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 810-8700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536

NPI: 1932292422

☐ Provider English Spoken: Y

Cultural Competency: N

SHERI ABERCROMBIE

📍 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 279-0925

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM SA 8:30AM-4PM

ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778

NPI: 1619304748

☐ Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

📍 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 810-8700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 2\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778

NPI: 1619304748

☐ Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

📍 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 279-0925

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 2\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☐ *Provider English Spoken: Y*
Cultural Competency: N

SARAH J BANKS

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ *Phone: (800) 926-8273*

Fax: (888) 539-8781

🕒 *After Hours Phone: (800) 926-8273*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

☐ *Provider English Spoken: Y*
Cultural Competency: N

SARAH J BANKS

📍 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

☎ *Phone: (800) 926-8273*

🕒 *After Hours Phone: (800) 926-8273*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

☐ *Provider English Spoken: Y*
Cultural Competency: N

SARAH J BANKS

📍 4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121

☎ *Phone: (800) 926-8273*

🕒 *After Hours Phone: (800) 926-8273*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

BARRON, KAVITA

Provider Gender: Female

License Number: A155596

NPI: 1821418542

☐ *Provider English Spoken: Y*
Cultural Competency: N

KAVITA BARRON

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ *Phone: (800) 926-8273*

🕒 *After Hours Phone: (800) 926-8273*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

BASS, GURGIANA

Provider Gender: Female

License Number: PSY24750

NPI: 1639325277

☐ *Provider English Spoken: Y*
Cultural Competency: N

GURGIANA BASS

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ *Phone: (858) 279-0925*

🕒 *After Hours Phone: (858) 279-0925*

🌐 *Website: N/A*

Accepting New Patients: Yes

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Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-4:30PM
TU 8AM-0PM
W 8AM-4:30PM
TH 8AM-0PM

BASS, GURGIANA

Provider Gender: Female

License Number: PSY24750

NPI: 1639325277

Provider English Spoken: Y
Cultural Competency: N

GURGIANA BASS

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

BREEDLOVE, AMANDA

Provider Gender: Female

License Number: MFC139230

NPI: 1316487119

Provider English Spoken: Y
Cultural Competency: N

AMANDA A BREEDLOVE

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

BROWN, DARCIÉ

Provider Gender: Female

License Number: MFC119851

NPI: 1639796071

Provider English Spoken: Y
Cultural Competency: N

DARCIÉ D BROWN

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CALLAGHAN, KATHRYN

Provider Gender: Female

License Number: MFC106901

NPI: 1558768812

Provider English Spoken: Y
Cultural Competency: N

KATHRYN R CALLAGHAN

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CEBALLOS, JACQUELINE

Provider Gender: Female
 License Number: LCS110194
 NPI: 1093350258
 Provider English Spoken: Y
 Cultural Competency: N
 JACQUELINE CEBALLOS
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-9025
 Fax: (858) 633-4680
 After Hours Phone: (858) 279-9025
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CEBALLOS, JACQUELINE

Provider Gender: Female
 License Number: LCS110194
 NPI: 1093350258
 Provider English Spoken: Y
 Cultural Competency: N
 JACQUELINE CEBALLOS
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CHOI, MIN

Provider Gender: Female
 License Number: MFC135952
 NPI: 1871195107
 Provider English Spoken: Y
 Cultural Competency: N
 MIN H CHOI
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844) 200-2426
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender

CHESHER, NICHOLAS

Provider Gender: Male
 License Number: PSY29290
 NPI: 1124539697
 Provider English Spoken: Y
 Cultural Competency: N
 NICHOLAS J CHESHER
 200 W ARBOR DR
 SAN DIEGO, CA 92103

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restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-6PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

🗣️ Provider English Spoken: Y
Cultural Competency: N

COSMINA S CIOBANU

📍 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

☎️ Phone: (858) 576-1700

Fax: (858) 966-8164

📞 After Hours Phone: (858)
576-1700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

🗣️ Provider English Spoken: Y
Cultural Competency: N

COSMINA S CIOBANU

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎️ Phone: (858) 576-1700

Fax: (858) 966-8164

📞 After Hours Phone: (858)
576-1700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

🗣️ Provider English Spoken: Y
Cultural Competency: N

COSMINA S CIOBANU

📍 8001 FROST ST
SAN DIEGO, CA 92123

☎️ Phone: (858) 576-1700

Fax: (858) 966-8164

📞 After Hours Phone: (858)
576-1700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

🗣️ Provider English Spoken: Y
Cultural Competency: N

COSMINA S CIOBANU

📍 4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

☎️ Phone: (858) 534-8019

📞 After Hours Phone: (858)
534-8019

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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CLEMENT, LUIS

Provider Gender: Male
License Number: PSY28534
NPI: 1235364712
☐ Provider English Spoken: Y
Cultural Competency: N

LUIS F CLEMENT

📍 2630 1ST AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 234-2158
Fax: (619) 234-0206

🕒 After Hours Phone: (619) 234-2158

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CRISOL, CAROLINE

Provider Gender: Female
License Number: MFC88616
NPI: 1962663617

☐ Provider English Spoken: Y
☐ Spanish

Cultural Competency: N

CAROLINE M CRISOL LMFT
INC

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100

Fax: (619) 662-4158

🕒 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

DEACON, CASSIE

Provider Gender: Female
License Number: LCS94105
NPI: 1720452998

☐ Provider English Spoken: Y
Cultural Competency: N

CASSIE C DEACON

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 810-8700

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

DEACON, CASSIE

Provider Gender: Female
License Number: LCS94105
NPI: 1720452998

☐ Provider English Spoken: Y
Cultural Competency: N

CASSIE C DEACON

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858) 279-0925

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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١. دليل الصحة النفسية

🕒 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

DIAZ, JAENAI

Provider Gender: Female

License Number: LCS80689

NPI: 1508241811

Provider English Spoken: Y
 Spanish

Cultural Competency: N

JAENAI DIAZ

📍 350 DICKINSON ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

DIOKNO, RHODA

Provider Gender: Female

License Number: PSY28073

NPI: 1629109483

Provider English Spoken: Y
Cultural Competency: N

ROHDA CARINO DIOKNO

📍 2630 1ST AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 234-2158
Fax: (619) 234-0206

🕒 After Hours Phone: (619)
234-2158

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

DOLNAK, DOUGLAS

Provider Gender: Male

License Number: 20A6059

NPI: 1316147085

Provider English Spoken: Y
Cultural Competency: N

DOUGLAS R DOLNAK

📍 10737 CAMINO RUIZ
SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426
Fax: (619) 474-4008

🕒 After Hours Phone: (844)
200-2426

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-6PM

DOSS, KATIE

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979

Provider English Spoken: Y
Cultural Competency: N

KATIE L DOSS

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
Fax: (858) 633-4680

🕒 After Hours Phone: (858)
810-8700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

DOSS, KATIE

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Provider Gender: Female
 License Number: LCS112693
 NPI: 1134825979
 □ Provider English Spoken: Y
 Cultural Competency: N
KATIE L DOSS
 📍 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 📞 Phone: (858) 279-0925
 Fax: (858) 633-4680
 🕒 After Hours Phone: (858) 279-0925
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 □ Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM

DSOUZA, NICOLE
 Provider Gender: Male
 License Number: LCS101958
 NPI: 1225462799
 □ Provider English Spoken: Y
 Cultural Competency: N
NICOLE A DSOUZA
 📍 330 LEWIS ST
 SAN DIEGO, CA 92103
 📞 Phone: (800) 926-8273

Fax: (888) 539-8781
 🕒 After Hours Phone: (800) 926-8273
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

DUNN-PIRIO, ANASTASIE
 Provider Gender: Female
 License Number: A157861
 NPI: 1700177136
 □ Provider English Spoken: Y
 Cultural Competency: N
ANASTASIE M DUNN-PIRIO
 📍 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103
 📞 Phone: (619) 543-3500
 Fax: (888) 539-8781

🕒 After Hours Phone: (619) 543-3500
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM

ESTAVILLO, SAUL
 Provider Gender: Male
 License Number: MFC102610
 NPI: 1528330073
 □ Provider English Spoken: Y
 □ Spanish
 Cultural Competency: N
SAUL J ESTAVILLO
 📍 286 EUCLID AVE STE 309
 SAN DIEGO, CA 92114
 📞 Phone: (619) 527-7390
 Fax: (619) 527-7394
 🕒 After Hours Phone: (619) 527-7390
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 □ Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM

ESTAVILLO, SAUL
 Provider Gender: Male
 License Number: MFC102610
 NPI: 1528330073

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☐ *Provider English Spoken: Y*
☐ *Spanish*

Cultural Competency: N

SAUL J ESTAVILLO

📍 3045 BEYER BLVD STE
D101

SAN DIEGO, CA 92154

☎ *Phone: (619) 662-4161*

Fax: (619) 662-4109

🕒 *After Hours Phone: (619)
662-4161*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

☐ *Site Languages(s) Spoken:
Spanish*

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

☐ *Provider English Spoken: Y*
Cultural Competency: N

MICHELLE E FIRESTONE

📍 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ *Phone: (858) 279-0925*

Fax: (858) 633-4680

🕒 *After Hours Phone: (858)*

279-0925

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

☐ *Provider English Spoken: Y*
Cultural Competency: N

MICHELLE E FIRESTONE

📍 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ *Phone: (858) 810-8700*

Fax: (858) 633-4680

🕒 *After Hours Phone: (858)
810-8700*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

FITZGERALD, MICHAEL

Provider Gender: Male

License Number: A73710

NPI: 1336393578

☐ *Provider English Spoken: Y*
Cultural Competency: N

MICHAEL W FITZGERALD

📍 16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

☎ *Phone: (800) 926-8273*

Fax: (888) 539-8781

🕒 *After Hours Phone: (800)
926-8273*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

FLANIGAN, MARILYN

Provider Gender: Female

License Number: MFC97326






NPI: 1588996912

☐ *Provider English Spoken: Y*
Cultural Competency: N

MARILYN Y FLANIGAN


📍 10737 CAMINO RUIZ STE
235

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SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844) 200-2426
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM



FORZANI, CHRISTINA

Provider Gender: Female
 License Number: PSY25710
 NPI: 1902939630
 Provider English Spoken: Y
 Cultural Competency: N
 CHRISTINA A FORZANI
 4290 POLK AVE
 SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 Fax: (858) 633-4681
 After Hours Phone: (619) 563-0250
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\None
 Gender Restriction: No Gender


restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER







FRANK, GUIDO

Provider Gender: Male
 License Number: A86429
 NPI: 1578608733
 Provider English Spoken: Y
 Cultural Competency: N
 GUIDO K FRANK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8145
 Fax: (858) 966-8154
 After Hours Phone: (858) 966-8145
 Website: N/A






Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\19
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FRY, LIANE

Provider Gender: Female
 License Number: MFC42570
 NPI: 1003110917
 Provider English Spoken: Y

Cultural Competency: N
 LIANE M FRY
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 Fax: (619) 595-0258
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 12\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

GARCIA, RICHARD

Provider Gender: Male
 License Number: LCS28742
 NPI: 1881198554
 Provider English Spoken: Y
 Cultural Competency: N
 RICHARD R GARCIA
 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 Fax: (619) 234-0206
 After Hours Phone: (619) 234-2158
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y

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TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

GARCIA, JENNI

Provider Gender: Female

License Number: LPCC10346

NPI: 1437775863

Provider English Spoken: Y

Spanish

Cultural Competency: N

JENNI GARCIA

3025 BEYER BLVD
SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619) 662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419

NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419

NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759

Provider English Spoken: Y

Spanish

Cultural Competency: N

JUANITA GOMEZ

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800) 926-8372

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p> <p>GULOTTA, SAMANTHA <i>Provider Gender: Female</i> <i>License Number: MFC134199</i> <i>NPI: 1790407732</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> SAMANTHA L GULOTTA  9909 MIRA MESA BLVD STE 200 SAN DIEGO, CA 92131  <i>Phone: (800) 926-8273</i>  <i>After Hours Phone: (800) 926-8273</i>  <i>Website: N/A</i> <i>Accepting New Patients: Yes</i> <i>Site English Spoken: Y</i> TDD: U <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <p>HERNANDEZ, SILVIA <i>Provider Gender: Female</i> <i>License Number: MFC51787</i> <i>NPI: 1982821179</i>  <i>Provider English Spoken: Y</i>  <i>Spanish</i> <i>Cultural Competency: N</i> SILVIA E HERNANDEZ</p>	<p> 3025 BEYER BLVD SAN DIEGO, CA 92154  <i>Phone: (619) 662-4100</i> <i>Fax: (619) 662-4119</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: N/A</i> <i>Accepting New Patients: Yes</i> <i>Site English Spoken: Y</i> TDD: U <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <p>JOSHI, YASH <i>Provider Gender: Male</i> <i>License Number: A147156</i> <i>NPI: 1598151433</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> YASH B JOSHI  200 W ARBOR DR SAN DIEGO, CA 92103  <i>Phone: (800) 926-8273</i>  <i>After Hours Phone: (800) 926-8273</i>  <i>Website: N/A</i> <i>Accepting New Patients: Yes</i> <i>Site English Spoken: Y</i> TDD: U <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i></p>	<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i></p> <p>KAYE, WALTER <i>Provider Gender: Male</i> <i>License Number: A24819</i> <i>NPI: 1922076223</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> WALTER H KAYE  4510 EXECUTIVE DR SAN DIEGO, CA 92121  <i>Phone: (858) 534-8019</i>  <i>After Hours Phone: (858) 534-8019</i>  <i>Website: N/A</i> <i>Accepting New Patients: Yes</i> <i>Site English Spoken: Y</i> TDD: U <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i></p> <p>KHAFAJA, MOHAMAD <i>Provider Gender: Male</i> <i>License Number: A115892</i> <i>NPI: 1780867119</i>  <i>Provider English Spoken: Y</i>  <i>Arabic</i></p>
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Cultural Competency: N
MOHAMAD H KHAFAJA
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

KHAMISA, SORAIYA
 Provider Gender: Female
 License Number: LCS81951
 NPI: 1811254386
 Provider English Spoken: Y
 Cultural Competency: N
SORAIYA N KHAMISA
 4520 EXECUTIVE DR STE A
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

KLUEMPER, NICOLE
 Provider Gender: Female
 License Number: PSY27064
 NPI: 1902125818
 Provider English Spoken: Y
 Cultural Competency: N
NICOLE S KLUEMPER
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 2\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

KLUEMPER, NICOLE
 Provider Gender: Female
 License Number: PSY27064
 NPI: 1902125818

Provider English Spoken: Y
 Cultural Competency: N
NICOLE S KLUEMPER
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 2\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

LABIB, MICHAEL
 Provider Gender: Male
 License Number: PSY34180
 NPI: 1609055797
 Provider English Spoken: Y
 Arabic
 Cultural Competency: N
MICHAEL LABIB
 1666 PRECISION PARK LN
 SAN DIEGO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 785-3384
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Yes

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Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

LIDLAW, JOHN

Provider Gender: Male

License Number: MFC44560

NPI: 1689790073

Provider English Spoken: Y
Cultural Competency: N

JOHN K LIDLAW

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female

License Number: PSY30776

NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

FLORENCIA LEBENSOHN CHIALVO

9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female

License Number: PSY30776

NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

FLORENCIA LEBENSOHN

CHIALVO

7910 FROST ST STE 350
SAN DIEGO, CA 92123

Phone: (858) 496-4800

After Hours Phone: (858) 496-4800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

LEDBETTER, ALEX

Provider Gender: Male

License Number: 20A20454

NPI: 1073017315

Provider English Spoken: Y
Cultural Competency: N

ALEX W LEDBETTER

6655 ALVARADO RD

SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

١. دليل الصحة النفسية

restriction

American Sign Language (ASL): Cultural Competency: N

N

♿ Accessibility: CONTACT PROVIDER

LEE, DAVID

Provider Gender: Male

License Number: A124329

NPI: 1871884130

☑ Provider English Spoken: Y

☑ Korean

Cultural Competency: N

DAVID J LEE

📍 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

LI, XIA

Provider Gender: Female

License Number: A163344

NPI: 1336670413

☑ Provider English Spoken: Y

☑ Mandarin

Cultural Competency: N

XIA LI

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

☑ Provider English Spoken: Y
Cultural Competency: N

SARAH E LINKE

📍 4910 DIRECTORS PL STE
250

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

☑ Provider English Spoken: Y
Cultural Competency: N

SARAH E LINKE

📍 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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 Hours: M-F 8AM-5PM


LIU, TIMOTHY

Provider Gender: Male

License Number: A105535

NPI: 1720262801


 Provider English Spoken: Y

 Chinese, Mandarin, Yue Chinese


Cultural Competency: N

TIMOTHY C LIU

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 5\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


LIU, TIMOTHY

Provider Gender: Male

License Number: A105535

NPI: 1720262801


 Provider English Spoken: Y

 Chinese, Mandarin, Yue Chinese

Cultural Competency: N

TIMOTHY C LIU

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

LONGARDNER, KATHERINE

Provider Gender: Female

License Number: A137963


NPI: 1801215926

 Provider English Spoken: Y

Cultural Competency: N

KATHERINE M LONGARDNER

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

MAGINOT-CHESHER, TAMARA

Provider Gender: Female

License Number: PSY28678

NPI: 1043441165


 Provider English Spoken: Y

Cultural Competency: N

TAMARA R MAGINOT

CHESHER

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (858) 534-8019

Fax: (858) 534-6727

 After Hours Phone: (858)
534-8019

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

MALAK, LAWRENCE

Provider Gender: Male

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ا. دليل الصحة النفسية

License Number: A115345

NPI: 1467773028

Provider English Spoken: Y
Cultural Competency: N

LAWRENCE T MALAK

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 14\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

350 DICKINSON ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

MCCULLUM, TIFFANY

Provider Gender: Female

License Number: PSY29329

NPI: 1528306206

Provider English Spoken: Y

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ا. دليل الصحة النفسية

Cultural Competency: N

TIFFANY MCCULLUM

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 428-7952

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 13\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

MILLER, MIKAELA

Provider Gender: Female

License Number: A181565

NPI: 1639752355

Provider English Spoken: Y
Cultural Competency: N

MIKAELA G MILLER

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: N
Spanish

TDD: U

Min/Max Age: 14\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

MILLS, BRAD

Provider Gender: Male

License Number: LCS87409

NPI: 1598542813

Provider English Spoken: Y
Spanish

Cultural Competency: N

BRAD A MILLS

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)
233-8500

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

MIRON, JEAN-PHILIPPE

Provider Gender: Male

License Number: A186033

NPI: 1952178196

Provider English Spoken: Y
Cultural Competency: N

JEAN-PHILIPPE MIRON

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MONTOYA, JESSICA

Provider Gender: Female




License Number: PSY31647

NPI: 1003421256

Provider English Spoken: Y
Cultural Competency: N

JESSICA L MONTOYA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Website: N/A


Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

 Provider English Spoken: Y
 Cultural Competency: N

SHAVON C MOORE

 4510 EXECUTIVE DR
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623


 Provider English Spoken: Y
 Arabic

Cultural Competency: N

LAMA MUHAMMAD

 350 DICKINSON ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM

MUHAMMAD, LAMA

Provider Gender: Female




License Number: A156500

NPI: 1558701623

 Provider English Spoken: Y
 Arabic

Cultural Competency: N

LAMA MUHAMMAD

 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

NAKAMURA, TIFFANY

Provider Gender: Female


License Number: LPCC4383


NPI: 1356846349

 Provider English Spoken: Y
 Cultural Competency: N

TIFFANY NAKAMURA

 4510 EXECUTIVE DR STE
 315
 SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
 534-8019

 Website: N/A

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Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620


Provider English Spoken: Y


Vietnamese

Cultural Competency: N

HOANG A NGUYEN

 410 DICKINSON ST STE 100
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620


Provider English Spoken: Y

Vietnamese


Cultural Competency: N

HOANG A NGUYEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315


Provider English Spoken: Y

Chinese, Mandarin


Cultural Competency: N

GRACE J NING

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315


Provider English Spoken: Y

Chinese, Mandarin

Cultural Competency: N

GRACE J NING

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): MARC A NORMAN

N

 Accessibility: CONTACT PROVIDER

NORMAN, MARC

Provider Gender: Male


License Number: PSY16278

NPI: 1922169101

 Provider English Spoken: Y
Cultural Competency: N

MARC A NORMAN

 350 DICKINSON ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL): HENRY J ORFF

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

NORMAN, MARC


Provider Gender: Male


License Number: PSY16278

NPI: 1922169101

 Provider English Spoken: Y
Cultural Competency: N

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-2827

 After Hours Phone: (619)
543-2827

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

ORFF, HENRY

Provider Gender: Male

License Number: PSY27099


NPI: 1144685215


 Provider English Spoken: Y
Cultural Competency: N


HENRY J ORFF

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

 Phone: (844) 757-5337

 After Hours Phone: (844)
757-5337

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM

ORTIZ, MARIA

Provider Gender: Female

License Number: PSY30953


NPI: 1497980775

 Provider English Spoken: Y
 Spanish

Cultural Competency: N

MARIA E ORTIZ

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PATTERSON-HYATT, KIMBERLY

Provider Gender: Female

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License Number: PSY31903

NPI: 1780997742

☐ Provider English Spoken: Y
Cultural Competency: N

KIMBERLY G

PATTERSON-HYATT

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

PATTON, MICHAEL

Provider Gender: Male

License Number: LCS18244

NPI: 1184756702

☐ Provider English Spoken: Y
Cultural Competency: N

MICHAEL A PATTON

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 233-8500

Fax: (619) 687-1067

🕒 After Hours Phone: (619)

233-8500

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PRINCE, RENEE

Provider Gender: Female

License Number: PSY32206

NPI: 1467737908

☐ Provider English Spoken: Y
Cultural Competency: N

RENEE K PRINCE

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (619) 474-4008

🕒 After Hours Phone: (844)
200-2426

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-6PM

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220

☐ Provider English Spoken: Y

☐ French

Cultural Competency: N

WALI Z QAYOUMI

📍 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

☎ Phone: (619) 294-3746

Fax: (888) 539-8781

🕒 After Hours Phone: (619)
294-3746

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

RADOJEVIC, NATASHA

Provider Gender: Female

License Number: PSY28495

NPI: 1821365008

☐ Provider English Spoken: Y
Cultural Competency: N

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NATASHA RADOJEVIC

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU

8:30AM-5:30PM

TH-F 8:30AM-5:30PM

RADOJEVIC, NATASHA

Provider Gender: Female

License Number: PSY28495

NPI: 1821365008

Provider English Spoken: Y

Cultural Competency: N

NATASHA RADOJEVIC

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU

8:30AM-5:30PM

TH-F 8:30AM-5:30PM

RIBEIRO CALDAS

DOMINGUES, ISABEL

Provider Gender: Female

License Number: A132160

NPI: 1023367216

Provider English Spoken: Y

French, Portuguese,
Spanish

Cultural Competency: N

ISABEL A RIBEIRO CALDAS

DOMINGUES

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

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16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SACHS, MELISSA

Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender

restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8AM-2:30PM

SALO, STEPHANIE

Provider Gender: Female
License Number: PSY26290
NPI: 1477967784
Provider English Spoken: Y
Cultural Competency: N
STEPHANIE P SALO
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 17\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM


SAWYER, CAROLYN

Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
3665 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Phone: (858) 966-5990
Fax: (858) 966-7508

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١. دليل الصحة النفسية

 After Hours Phone: (858) 966-5990

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SAWYER, CAROLYN

Provider Gender: Female


License Number: A149116

NPI: 1043653249

 Provider English Spoken: Y
Cultural Competency: N

CAROLYN M SAWYER

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 246-0794

Fax: (858) 496-9257

 After Hours Phone: (858) 246-0794

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313


NPI: 1710234273


 Provider English Spoken: Y
Cultural Competency: N


KRISTON B SCHELLINGER

 330 LEWIS ST

SAN DIEGO, CA 92103

 Phone: (858) 246-1979

 After Hours Phone: (858) 246-1979

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273


 Provider English Spoken: Y
Cultural Competency: N

KRISTON B SCHELLINGER

 9909 MIRA MESA BLVD

STE 200

SAN DIEGO, CA 92131

 Phone: (858) 246-1979

 After Hours Phone: (858) 246-1979

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273


 Provider English Spoken: Y
Cultural Competency: N

KRISTON B SCHELLINGER

 9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender

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restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

SCHLOSSER, TARA

Provider Gender: Female

License Number: MFC107868

NPI: 1407220437

☑ Provider English Spoken: Y
Cultural Competency: N

TARA S SCHLOSSER

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

SERIO, TAYLOR

Provider Gender: Female

License Number: LCS107050

NPI: 1093217382

☑ Provider English Spoken: Y
Cultural Competency: N

TAYLOR L SERIO

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

SERIO, TAYLOR

Provider Gender: Female

License Number: LCS107050

NPI: 1093217382

☑ Provider English Spoken: Y
Cultural Competency: N

TAYLOR L SERIO

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
810-8700

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

SHU, I WEI

Provider Gender: Male

License Number: A103813

NPI: 1992840144

☑ Provider English Spoken: Y
Cultural Competency: N

I WEI SHU

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (858) 534-6200

Fax: (858) 534-6205

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

SILVEY, CHRISTOPHER

Provider Gender: Male

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License Number: LCS85942


NPI: 1932793502

 Provider English Spoken: Y
Cultural Competency: N

CHRISTOPHER J SILVEY

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (858) 578-4220

Fax: (858) 578-4417

 After Hours Phone: (858)
578-4220

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729


NPI: 1972088185


 Provider English Spoken: Y
Cultural Competency: N

ROBERTO SOLORIO JR

 4690 EL CAJON BLVD

SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

SUAREZ, ROBERTO

Provider Gender: Male

License Number: MFC25098

NPI: 1386785160


 Provider English Spoken: Y
 Spanish

Cultural Competency: N


ROBERTO SUAREZ

 3025 BEYER BLVD

SAN DIEGO, CA 92154

 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

SWEIGERT, JAMIE


Provider Gender: Female

License Number: LCS112304


NPI: 1396353595

 Provider English Spoken: Y
Cultural Competency: N

JAMIE L SWEIGERT

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158


Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155





NPI: 1659920403

 Provider English Spoken: Y
Cultural Competency: N





STEPHANIE J TARLE

 6655 ALVARADO RD

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SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

TILTON, PETER

Provider Gender: Male
 License Number: G27781
 NPI: 1538258694
 Provider English Spoken: Y
 Cultural Competency: N
 PETER A TILTON
 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 Fax: (619) 234-0206
 After Hours Phone: (619) 234-2158
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction



American Sign Language (ASL): N
 Cultural Competency: N
 TUAN TO

 Accessibility: CONTACT PROVIDER


TO, TUAN

Provider Gender: Male
 License Number: PSY30204
 NPI: 1255696183
 Provider English Spoken: Y
 Vietnamese
 Cultural Competency: N

American Sign Language (ASL): TUAN TO

 4290 POLK AVE
 SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 5\None
 Gender Restriction: No Gender restriction


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male
 License Number: PSY30204
 NPI: 1255696183
 Provider English Spoken: Y
 Vietnamese

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 5\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male
 License Number: PSY30204
 NPI: 1255696183
 Provider English Spoken: Y
 Vietnamese

Cultural Competency: N
 TUAN TO

 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TDD: U

Min/Max Age: 5\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y Cultural Competency: N

EMILY A TROYER

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619) 280-2058

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SA 8AM-2PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y Cultural Competency: N

EMILY A TROYER

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619) 563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

TWAMLEY, ELIZABETH

Provider Gender: Female

License Number: PSY19150

NPI: 1700089141

Provider English Spoken: Y Cultural Competency: N

ELIZABETH W TWAMLEY

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619) 233-8500

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

WEISSMAN, CORY

Provider Gender: Male

License Number: A174625

NPI: 1528720661

Provider English Spoken: Y Cultural Competency: N

CORY R WEISSMAN

16918 DOVE CANYON RD STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

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Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

WU, MICHELLE

Provider Gender: Female


License Number: A125139

NPI: 1043650088

 Provider English Spoken: Y
Cultural Competency: N

MICHELLE L WU

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8145

Fax: (858) 966-8164

 After Hours Phone: (858) 966-8145

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

YAGUDAYEVA, RAISA

Provider Gender: Female

License Number: 20A14848


NPI: 1942555990

 Provider English Spoken: Y
 Russian

Cultural Competency: N

RAISA YAGUDAYEVA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

YIDI, DIANA

Provider Gender: Female

License Number: LCS110300


NPI: 1194438663

 Provider English Spoken: Y
 Spanish


Cultural Competency: N

DIANA L YIDI

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

 Site Language(s) Spoken: Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



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

ZAYAS, MARIO

Provider Gender: Male

License Number: MFC111273

NPI: 1275943557

 Provider English Spoken: Y
 Spanish


Cultural Competency: N


MARIO E ZAYAS

 3025 BEYER BLVD STE E-101
SAN DIEGO, CA 92154

 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

TDD: U

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Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 9AM-7PM
W-F 9AM-6PM

ZIMMERMAN, JENNIFER

Provider Gender: Female

License Number: LCS28729

NPI: 1811449077

Provider English Spoken: Y
Cultural Competency: N

JENNIFER A ZIMMERMAN

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

ZIMMERMAN, JENNIFER

Provider Gender: Female

License Number: LCS28729

NPI: 1811449077

Provider English Spoken: Y
Cultural Competency: N

JENNIFER A ZIMMERMAN

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-9676

Fax: (858) 633-4680

After Hours Phone: (858) 279-9676

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SAN MARCOS

ALTAMIRANO, LEON

Provider Gender: Male

License Number: PSY23734

NPI: 1619271517

Provider English Spoken: Y
Spanish

Cultural Competency: N

LEON ALTAMIRANO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ARIELLA, LYND A

Provider Gender: Female

License Number: PSY19450

NPI: 1073518965

Provider English Spoken: Y
Cultural Competency: N

LYND A R ARIELLA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744


After Hours Phone: (760) 736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Site Languages(s) Spoken: Spanish


TDD: U

Min/Max Age: 5\50

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO

Provider Gender: Male

License Number: A71653

NPI: 1033133483


 Provider English Spoken: Y

 Portuguese, Spanish

Cultural Competency: N

CLAUDIO O CABREJOS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

FLYNN, DANIELLE

Provider Gender: Female


License Number: PSY26184

NPI: 1477785137

 Provider English Spoken: Y
Cultural Competency: N

DANIELLE I FLYNN

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

GEORGIEV, MARY-JO

Provider Gender: Female


License Number: PSY17954

NPI: 1518996875

 Provider English Spoken: Y
Cultural Competency: N


MARY-JO GEORGIEV

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

IMAM, SYED

Provider Gender: Male

License Number: PSY27695

NPI: 1447428271


 Provider English Spoken: Y

 Hindi, Urdu

Cultural Competency: N


SYED IMAM

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 15\None

Gender Restriction: No Gender


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restriction

American Sign Language (ASL): NPI: 1972088185

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

REEG, JESSICA

Provider Gender: Female

License Number: MFC124306

NPI: 1144382987


Provider English Spoken: Y
 Spanish

Cultural Competency: N

JESSICA REEG

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729

NPI: 1972088185


Provider English Spoken: Y

Cultural Competency: N

ROBERTO SOLORIO JR


 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

TONG, GARRICK

Provider Gender: Male

License Number: A102192

NPI: 1831361278

Provider English Spoken: Y


Cantonese

Cultural Competency: N

GARRICK G TONG

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U


Min/Max Age: 4\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

TORRES, HECTOR

Provider Gender: Male

License Number: PSY13309

NPI: 1720265614

Provider English Spoken: Y


Spanish

Cultural Competency: N

HECTOR M TORRES

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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American Sign Language (ASL): License Number: A166646
N

♿ Accessibility: CONTACT PROVIDER

SAN YSIDRO

BALTRUS, JUSTINEANN

Provider Gender: Female

License Number: MFC132018

NPI: 1285040709

☐ Provider English Spoken: Y

☐ Tagalog

Cultural Competency: N

JUSTINEANN A BALTRUS

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

CRAWFORD-DAY, ANN

Provider Gender: Female

NPI: 1386149706

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

ANN E CRAWFORD-DAY

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-8PM
SA 8AM-2PM

DEPAOLO, AMANDA

Provider Gender: Female

License Number: LCS99056

NPI: 1215420138

☐ Provider English Spoken: Y

Cultural Competency: N

AMANDA L DEPAOLO

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

FONTANA, LOUIS

Provider Gender: Male

License Number: G49072

NPI: 1780734343

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

LOUIS A FONTANA

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 18\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-8PM SA 8AM-2PM

GONZALEZ-GARCIA, CAROLINA

Provider Gender: Female
 License Number: MFC41111
 NPI: 1215321955
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 CAROLINA GONZALES GARCIA
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 600-4870
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

IBANEZ, BERENICE

Provider Gender: Female
 License Number: PSY22080
 NPI: 1740394386
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 BERENICE B IBANEZ
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

JAMES, CHRISTINE

Provider Gender: Female
 License Number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Y
 Cultural Competency: N
 CHRISTINE E JAMES
 1666 PRECISION PARK LN
 SAN YSIDRO, CA 92173

Phone: (619) 662-4100
 Fax: (619) 785-3384
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

JENNINGS, AMY

Provider Gender: Female
 License Number: LCS100075
 NPI: 1609549161
 Provider English Spoken: Y
 Cultural Competency: N
 AMY E JENNINGS
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Gender Restriction: No Gender restriction

American Sign Language (ASL): License Number: LCS86171
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-8PM
SA 8AM-2PM

JIMENEZ, NANCY

Provider Gender: Female

License Number: MFC141209

NPI: 1568023596

🗨️ Provider English Spoken: Y
Cultural Competency: N

NANCY JIMENEZ

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

☎️ Phone: (619) 662-4100

Fax: (619) 785-3384

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

LOPEZ, MARIBEL

Provider Gender: Female

License Number: LCS86171

NPI: 1669180600

🗨️ Provider English Spoken: Y
Spanish

Cultural Competency: N
MARIBEL, LOPEZ

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎️ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-8PM
SA 8AM-2PM

PETERSEN, KATE

Provider Gender: Female

License Number: MFC130200

NPI: 1598237281

🗨️ Provider English Spoken: Y
Cultural Competency: N

KATE PETERSEN

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

☎️ Phone: (619) 662-4100

Fax: (619) 785-3384

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SANTEE

MEAGHER, RAISHELLE

Provider Gender: Female

License Number: LCS109804

NPI: 1851821904

🗨️ Provider English Spoken: Y
Cultural Competency: N

RAISHELLE L MEAGHER

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071

☎️ Phone: (619) 662-4100

Fax: (619) 662-4196

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

VALLEY CENTER

PLASCENCIA, CINDY

Provider Gender: Female

License Number: MFC113536

NPI: 1952723736

Provider English Spoken: Y

Spanish

Cultural Competency: N

CINDY PLASCENCIA

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 742-9919

Fax: (360) 462-2750

After Hours Phone: (760) 742-9919

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

VISTA

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-6PM

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Lithuanian, Urdu, Chinese, Vietnamese, Farsi, Tagalog, Arabic, Spanish

TDD: U

Min/Max Age: 5\80

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y Cultural Competency: N

JENNIFER L BELL

1000 VALE TERRACE DR VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu

TDD: U

Min/Max Age: 5\80

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y Cultural Competency: N

JENNIFER L BELL

1000 VALE TERRACE DR VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Korean, Marathi, French, Estonian, Telugu, Farsi, Vietnamese, Hindi, Spanish, Tagalog

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-7PM F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SA 9AM-4PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

☐ Provider English Spoken: Y

☐ Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

☐ Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Hindi, Korean, Marathi, Spanish, Tagalog, Telugu
 TDD: U
 Min/Max Age: 4\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-TU 8AM-8PM
 W 9AM-7PM
 TH 8AM-8PM
 F 8AM-5PM
 SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female
 License Number: LCS87166
 NPI: 1285170662
 🗣️ Provider English Spoken: Y
 Cultural Competency: N
 VANESSA Y CRUZ
 📍 1000 VALE TERRACE DR
 VISTA, CA 92084
 📞 Phone: (760) 631-5000
 📠 Fax: (760) 414-3892
 ⌚ After Hours Phone: (760) 631-5000
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 🗣️ Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-TU 8AM-8PM
 W 9AM-7PM
 TH 8AM-8PM
 F 8AM-5PM
 SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female
 License Number: LCS87166
 NPI: 1285170662
 🗣️ Provider English Spoken: Y
 Cultural Competency: N
 VANESSA Y CRUZ
 📍 134 GRAPEVINE RD
 VISTA, CA 92083
 📞 Phone: (760) 631-5000
 📠 Fax: (760) 414-3892
 ⌚ After Hours Phone: (760) 631-5000
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 4\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

⌚ Hours: M-TH 9AM-7PM
 F 9AM-5PM
 SA 9AM-4PM






CRUZ, VANESSA

Provider Gender: Female
 License Number: LCS87166
 NPI: 1285170662
 🗣️ Provider English Spoken: Y
 Cultural Competency: N
 VANESSA Y CRUZ
 📍 134 GRAPEVINE RD
 VISTA, CA 92083
 📞 Phone: (760) 631-5000
 📠 Fax: (760) 414-3892
 ⌚ After Hours Phone: (760) 631-5000
 🌐 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-TH 9AM-7PM
 F 9AM-5PM
 SA 9AM-4PM





DOUGHERTY, CHRISTINE



Provider Gender: Female
 License Number: LCS26686
 NPI: 1003194960
 🗣️ Provider English Spoken: Y

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Cultural Competency: N
CHRISTINE A DOUGHERTY
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER



DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
 Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:








*Chinese, Estonian, Farsi,
 French, Hindi, Korean,
 Marathi, Spanish, Telugu,
 Vietnamese, Tagalog*
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 9AM-8PM
 F 9AM-5PM
 SA 9AM-4PM

MENDEZ, ADRIANA


Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
ADRIANA J MENDEZ
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-8PM
 SA 9AM-4PM







MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
ADRIANA J MENDEZ
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299
NPI: 1487196333
 Provider English Spoken: Y




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



Cultural Competency: N
GRETA R MEYERHOF
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER




MEYERHOF, GRETA
Provider Gender: Female
License Number: MFC32299
NPI: 1487196333
 *Provider English Spoken: Y*
Cultural Competency: N
GRETA R MEYERHOF
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

NEVILLE, MARGARET
Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
 *Provider English Spoken: Y*
Cultural Competency: N
MARGARET R NEVILLE
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y

 *Site Languages(s) Spoken:*
 Arabic, Chinese, Lithuanian,
 Farsi, Spanish, Tagalog,
 Urdu, Vietnamese
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

SA 8AM-4PM
NEVILLE, MARGARET
Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
 *Provider English Spoken: Y*
Cultural Competency: N
MARGARET R NEVILLE
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
 *Provider English Spoken: Y*
Cultural Competency: N
MITESH K PATEL
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

☑ Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

📍 1000 VALE TERRACE DR VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

☑ Provider English Spoken: Y

☑ Spanish

Cultural Competency: N

ADRIANA SANCHEZ

📍 134 GRAPEVINE RD VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

☑ Provider English Spoken: Y

☑ Spanish

Cultural Competency: N

ADRIANA SANCHEZ

📍 1000 VALE TERRACE DR VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

☑ Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

📍 134 GRAPEVINE RD VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

🗣 Provider English Spoken: Y
Cultural Competency: N

CRISTINA I SLOAN

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

🗣 Provider English Spoken: Y
Cultural Competency: N

CRISTINA I SLOAN

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

🗣 Provider English Spoken: Y
Spanish

Cultural Competency: N

SONYA L SMITH

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

🗣 Provider English Spoken: Y
Spanish

Cultural Competency: N


SONYA L SMITH

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

☎ After Hours Phone: (760)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U


Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


WILSON, CARLENE

Provider Gender: Female
 License Number: LCS74685
 NPI: 1508327081

 Provider English Spoken: Y
 Cultural Competency: N

CARLENE WILSON

 1000 VALE TERRACE DR
 VISTA, CA 92084

 Phone: (760) 631-5000
 Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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


WILSON, CARLENE

Provider Gender: Female
 License Number: LCS74685
 NPI: 1508327081


 Provider English Spoken: Y
 Cultural Competency: N

CARLENE WILSON

 134 GRAPEVINE RD
 VISTA, CA 92083

 Phone: (760) 631-5000
 Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ALPINE

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

☐ Site English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)

445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y





























Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p>N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9AM-5PM TU 10AM-6PM W 9AM-5PM TH 8AM-5PM F 9AM-4PM</p>	<p>W 9AM-5PM TH 8AM-5PM F 9AM-4PM</p> <p>KALBAKJI, NATALY, OD Provider Gender: Female License Number: 34943 NPI: 1700556438 Provider English Spoken: Y  Arabic Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9AM-5PM TU 10AM-6PM W 9AM-5PM TH 8AM-5PM F 9AM-4PM</p>	<p>NPI: 1760473797 Provider English Spoken: Y  Spanish Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>
<p>DYER, SHARON, OD Provider Gender: Female License Number: 33450 NPI: 1063866887 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p>DYER, SHARON, OD Provider Gender: Female License Number: 33450 NPI: 1063866887 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p>DYER, SHARON, OD Provider Gender: Female License Number: 33450 NPI: 1063866887 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>
<p> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9AM-5PM TU 10AM-6PM</p>	<p>KATZMAN, BARRY, MD Provider Gender: Male License Number: A34834</p>	<p>KHALIL, VADY, OD Provider Gender: Male License Number: 35137 NPI: 1275263584 Provider English Spoken: Y  Arabic Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801
 After Hours Phone: (619) 445-2687
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

KHIEU, TINA, OD

Provider Gender: Female
 License Number: 34777
 NPI: 1962031617
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801
 After Hours Phone: (619) 445-2687
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

MARR, RYAN, OD

Provider Gender: Male
 License Number: 35302
 NPI: 1235857525
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801
 After Hours Phone: (619) 445-2687
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within

1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
 License Number: A155228
 NPI: 1588624852
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
 ALPINE, CA 91901

Phone: (619) 445-2687
 Fax: (619) 445-0801

After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

Site English Spoken: Y
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

☐ Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

☐ Gujarati, Hindi, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

☐ Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

📄 Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

🕒 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

BONITA

CHA, DANIEL, OD

Provider Gender: Male

License Number: 14779

NPI: 1386078020

Provider English Spoken: Y

📄 Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Cultural Competency: Y
EYECARE OF BONITA
 4502 BONITA RD
 BONITA, CA 91902
 Phone: (619) 479-7334
 Fax: (619) 475-3456
 After Hours Phone: (619) 479-7334
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 8AM-6:30PM
 W 8AM-6PM
 TH 12:30AM-6PM
 F 8AM-6PM
 SA 9AM-2PM

CARLSBAD

HO, TRAM, OD
 Provider Gender: Female
 License Number: 13485
 NPI: 1245464460
 Provider English Spoken: Y
 Vietnamese
 Cultural Competency: Y
EYE STYLE OPTOMETRY
 5814 VAN ALLEN WAY STE

146
 CARLSBAD, CA 92008
 Phone: (760) 606-2020
 After Hours Phone: (760) 606-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: TU 9AM-5PM
 W 10AM-6PM
 TH 9AM-5PM
 F 8AM-4PM
 SA 9AM-3PM

CHULA VISTA

CASTILLEJOS, DAVID, MD
 Provider Gender: Male
 License Number: A44482
 NPI: 1558446401
 Provider English Spoken: Y
 French, Portuguese, Spanish, Tagalog
 Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
 342 F ST
 CHULA VISTA, CA 91910

Phone: (619) 422-1471
 Fax: (619) 271-7044
 After Hours Phone: (619) 422-1471
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: French, Spanish, Tagalog
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 8AM-5PM
 TU 7AM-5PM
 W-F 8AM-5PM

CASTILLEJOS, MARIA, MD
 Provider Gender: Female
 License Number: A37652
 NPI: 1043395098
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
 342 F ST
 CHULA VISTA, CA 91910
 Phone: (619) 422-1471
 Fax: (619) 271-7044
 After Hours Phone: (619) 422-1471
 Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: French, Spanish, Tagalog</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p> <p><input type="clock"/> Hours: M 8AM-5PM TU 7AM-5PM W-F 8AM-5PM</p>	<p>American Sign Language (ASL): 1/2 mile from Site): 1U</p> <p><input type="clock"/> Hours: SU 10AM-4PM M-F 9AM-7PM SA 9AM-5PM</p>	
<p>CHAN, KWOK FUNG, OD</p> <p>Provider Gender: Male</p> <p>License Number: 35087</p> <p>NPI: 1407508385</p> <p>Provider English Spoken: Y</p> <p>Cultural Competency: Y</p> <p>VILLA OPTOMETRY INC</p> <p><input type="location"/> 523 TELEGRAPH CANYON RD CHULA VISTA, CA 91910</p> <p><input type="phone"/> Phone: (619) 482-2020</p> <p>Fax: (619) 482-2671</p> <p><input type="clock"/> After Hours Phone: (619) 482-2020</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</p>	<p>CHISHOLM, KAREN, OD</p> <p>License Number: 35450</p> <p>NPI: 1568155190</p> <p>Provider English Spoken: Y</p> <p><input type="checkbox"/> Spanish</p> <p>Cultural Competency: Y</p> <p>OTAY RANCH EYEWORKS OPTOMETRY</p> <p><input type="location"/> 1741 EASTLAKE PKWY STE 101 CHULA VISTA, CA 91915</p> <p><input type="phone"/> Phone: (619) 421-6600</p> <p>Fax: (619) 421-6006</p> <p><input type="clock"/> After Hours Phone: (619) 421-6600</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Arabic, Hindi, Spanish</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p> <p><input type="clock"/> Hours: M 9AM-5PM TU 9AM-6PM W 9AM-5PM TH 9AM-6PM F 8AM-4PM SA 9AM-2PM</p>	<p>HUANG, PETER, OD</p> <p>Provider Gender: Male</p> <p>License Number: 11659</p> <p>NPI: 1639100522</p> <p>Provider English Spoken: Y</p> <p><input type="checkbox"/> Spanish</p> <p>Cultural Competency: Y</p> <p>PETER D HUANG OD INC</p> <p><input type="location"/> 557 H ST CHULA VISTA, CA 91910</p> <p><input type="phone"/> Phone: (619) 422-0139</p> <p>Fax: (619) 422-0066</p> <p><input type="clock"/> After Hours Phone: (619) 422-0139</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Vietnamese</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

☐ Hindi

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

☎ Phone: (619) 421-6600

Fax: (619) 421-6006

🕒 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

☎ Phone: (619) 421-6600

Fax: (619) 421-6006

🕒 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

☎ Phone: (619) 421-6600

Fax: (619) 421-6006

🕒 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

MASCARENO, EFRAIN, OD

Provider Gender: Male

License Number: 10906

NPI: 1457507279

Provider English Spoken: Y

Cultural Competency: Y

CLEAR VISION OPTOMETRY

DR MASCARENO

📍 440 4TH AVE

CHULA VISTA, CA 91910

☎ Phone: (619) 427-2020

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (866) 254-5707

☎ After Hours Phone: (619) 427-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH 9AM-6PM
F 9AM-5PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

☎ Phone: (619) 421-6600

Fax: (619) 421-6006

☎ After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:

Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: SU 10AM-4PM
M-F 9AM-7PM

SA 9AM-5PM

NGUYEN, TRACY, OD

Provider Gender: Female

License Number: 10859

NPI: 1265596621

Provider English Spoken: Y

☐ Vietnamese

Cultural Competency: Y

ESSENTIAL EYECARE

OPTOMETRY

📍 345 F ST STE 240

CHULA VISTA, CA 91910

☎ Phone: (858) 467-0655

Fax: (619) 425-9797

☎ After Hours Phone: (858) 467-0655

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH 10AM-3PM

PHAM, NINA, OD

Provider Gender: Female

License Number: 35360

NPI: 1598403867

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST

CHULA VISTA, CA 91910

☎ Phone: (619) 422-1471

Fax: (619) 271-7044

☎ After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 8AM-5PM
TU 7AM-5PM

W-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PLUCINIK, STANLEY, OD

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE

MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM

TU 7AM-5PM

W-F 8AM-5PM

SCOVILL, ALEXANDRA, OD

Provider Gender: Female

License Number: 33711

NPI: 1184146094

Provider English Spoken: Y

Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE

MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM

TU 7AM-5PM

W-F 8AM-5PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM

M-F 9AM-7PM

SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Arabic

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619) 421-6600

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

VILLA, ANGELICA, OD

Provider Gender: Female

License Number: 10561

NPI: 1962544965

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VILLA OPTOMETRY INC

523 TELEGRAPH CANYON RD

CHULA VISTA, CA 91910

Phone: (619) 482-2020

Fax: (619) 482-2671

After Hours Phone: (619) 482-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM
W 11AM-6PM
TH-F 9AM-6PM

CORONADO

COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

801 ORANGE AVE STE 204 CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619) 437-4406

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

GRAY, IGA, MD

Provider Gender: Female

License Number: A174875

NPI: 1033538350

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

801 ORANGE AVE STE 204 CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619) 437-4406

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

KATZMAN, LEE, MD

Provider Gender: Male

License Number: A135673

NPI: 1912297284

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

MANNEN, JOSEPH, OD

Provider Gender: Male
License Number: 33650
NPI: 1851827034

Provider English Spoken: Y
Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996

Provider English Spoken: Y
Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

YOUNG, ALLA, OD

Provider Gender: Female
License Number: 34191
NPI: 1285085142

Provider English Spoken: Y

Site English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

W-TH 9AM-4:30PM

EL CAJON

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese
Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8:30AM-6PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8:30AM-6PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8:30AM-6PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 8:30AM-6PM

BUTLER, KIM, OD

Provider Gender: Male

License Number: 6405

NPI: 1467444844

Provider English Spoken: Y

Cultural Competency: Y

KIM J BUTLER OD

📍 1273 BROADWAY

EL CAJON, CA 92021

☎ Phone: (619) 579-2345

Fax: (619) 579-0876

🕒 After Hours Phone: (619)
579-2345

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM
SA 9AM-12AM

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155

EL CAJON, CA 92019

☎ Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken:
Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200

EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200

EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 8:30AM-6PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

📄 Korean

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

📄 Spanish

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y


Arabic

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

MCMURREN, BRITTANY, OD

Provider Gender: Female

License Number: 14824


NPI: 1104243815

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

 Phone: (619) 670-6296

Fax: (619) 670-8852

 After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Italian, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

PANDYA, BHUMIKA, OD


Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y

 Hindi


Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes


 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T


 Hours: M-F 8:30AM-6PM

PATEL, GITANE, MD


Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y

Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes


 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326


Provider English Spoken: Y

 Gujarati, Hindi, Spanish


Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes


 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

SCOTT, JEFFREY, OD


Provider Gender: Male
License Number: 34978
NPI: 1568813434

Provider English Spoken: Y


Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

📄 Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

WERNER, REX, OD

Provider Gender: Male

License Number: 9378

NPI: 1891760716

Provider English Spoken: Y

📄 Italian, Spanish

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155 EL CAJON, CA 92019

☎ Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619) 670-6296

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Language(s) Spoken: Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

WERNER, R AARON, OD

Provider Gender: Male

License Number: 13478

NPI: 1821259458

Provider English Spoken: Y

🗪 Site Spanish

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

📞 Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

🗪 Site English Spoken: Y

🗪 Site Languages(s) Spoken:
Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

🗪 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200

EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

🗪 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

🗪 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL): **AOTO, KIM, OD**

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

ENCINITAS

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL

ENCINITAS

📍 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

📞 After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

☑ Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

📞 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

☑ Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL

ENCINITAS

📍 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

📞 After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

📞 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within

1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM
CHIUI, STEPHAN, MD
Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Site Languages(s) Spoken: Spanish
Public transportation (within 1/2 mile from Site): 1T

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760) 943-7141

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Accepting New Patients: Yes N

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584


Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): Provider Gender: Male

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777


NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y


Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL ENCINITAS

 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302


NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

 Phone: (760) 943-7141

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL ENCINITAS

📍 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

☎ After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

☐ Indonesian, Spanish Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

☐ German, Spanish Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 309-7702
Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

ESCONDIDO

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

BANDAK, DIANA, OD

Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Arabic
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

BANSAL, PREETI, MD

Provider Gender: Female
License Number: A90890
NPI: 1871664631

Provider English Spoken: Y

Spanish
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes



Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N





اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار



 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8AM-5PM**

BEAUDRY, AMANDA, OD

Provider Gender: Female
License Number: 33385
NPI: 1477903516
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS

 2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):





N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8:30AM-4:30PM**



BERGMARK, JAMIE, OD

Provider Gender: Female

License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS

 2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):






N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8:30AM-4:30PM**

BHATIA, SHAGUN, MD





Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8:30AM-4:30PM**


BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction  Hours: M-F 8AM-5PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

CHANG, TOM, MD

Provider Gender: Male


License Number: A69909


NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

CHAU, VIVIAN, OD

Provider Gender: Female

License Number: 35427

NPI: 1558052951

Provider English Spoken: Y


 Chinese

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

DUONG, KIM, OD

Provider Gender: Female

License Number: 34222

NPI: 1114448651

Provider English Spoken: Y

 Vietnamese


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-4:30PM

GOLDSTONE, ADAM, OD

Provider Gender: Male

License Number: 11051

NPI: 1316972995


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

☎ Phone: (760) 743-5872

Fax: (760) 743-5879

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

☎ Phone: (760) 743-5872

Fax: (760) 743-5879

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

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Fax: (760) 743-5879

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

☑ Arabic

Cultural Competency: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KARAPETIAN, ELENA, OD

Provider Gender: Female

License Number: 34514

NPI: 1184250417

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

KWAK, ANGELA, OD

Provider Gender: Female

License Number: 13692

NPI: 1255564860

Provider English Spoken: Y

Site Spanish

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Site Spanish, Vietnamese
Cultural Competency: Y

TAM T LE OD INC

1711 E VALLEY PKWY STE
109

ESCONDIDO, CA 92027

Phone: (760) 737-6064

Fax: (760) 737-6064

After Hours Phone: (760)
737-6064

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction


American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-TH 9AM-5:30PM
F 9AM-1PM**

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

 **Spanish**


Cultural Competency: Y

RADY CHILDRENS


SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 **Phone: (760) 755-7600**

Fax: (760) 755-7699

 **After Hours Phone: (760)
755-7600**

Accepting New Patients: Yes


 **Site English Spoken: Y**

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F
8:30AM-4:30PM**

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026


 **Phone: (760) 743-5872**

Fax: (760) 743-5879

 **After Hours Phone: (760)
743-5872**

Accepting New Patients: Yes

 **Site English Spoken: Y**

 **Site Languages(s) Spoken:
Spanish**


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY

STE 200

ESCONDIDO, CA 92026


 **Phone: (760) 743-5872**

Fax: (760) 743-5879

 **After Hours Phone: (760)
743-5872**

Accepting New Patients: Yes

 **Site English Spoken: Y**

 **Site Languages(s) Spoken:
Spanish**

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 **Phone: (760) 755-7600**

Fax: (760) 755-7699

 **After Hours Phone: (760)
755-7600**

Accepting New Patients: Yes

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☐ Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782

Provider English Spoken: Y
☐ Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

☎ Phone: (760) 743-5872
Fax: (760) 743-5879

📞 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MOVAGHAR, MANSOOR, MD

Provider Gender: Male
License Number: A100897
NPI: 1497792220

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600
Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License Number: A73282
NPI: 1235287947

Provider English Spoken: Y

☐ German, Spanish
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600
Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

PANSARA, MEGHA, MD

Provider Gender: Female
License Number: A143429
NPI: 1184983728

Provider English Spoken: Y

☐ Gujarati
Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

RADY CHILDRENS SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 755-7600
☎ Fax: (760) 755-7699
📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

☐ Gujarati, Hindi, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
☎ Fax: (760) 743-5879
📞 After Hours Phone: (760)

743-5872

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
☎ Fax: (760) 743-5879
📞 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
☎ Fax: (760) 743-5879
📞 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

SAMUEL, MICHAEL, MD

Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

THACH, TERILYN, OD

Provider Gender: Female
License Number: 11456
NPI: 1710030861
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y

INSIGHT VISION OPTOMETRY

2419 E VALLEY PKWY
ESCONDIDO, CA 92027
Phone: (760) 738-9931
Fax: (760) 888-2181
After Hours Phone: (760)
738-9931

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 9:30AM-5PM
TH 10AM-6PM
F 9:30AM-5PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

TRAN, ALEXANDER, OD

Provider Gender: Male
License Number: 14136
NPI: 1902414790
Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None



Gender Restriction: No Gender
restriction

American Sign Language (ASL):





N

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8:30AM-4:30PM**

VERRET, ERIC, OD

Provider Gender: Male
License Number: 11401
NPI: 1194891853
Provider English Spoken: Y
 French, Spanish
Cultural Competency: Y
ESCONDIDO EYECARE
 613 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 747-7979
Fax: (760) 747-7999
 After Hours Phone: (760) 747-7979
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, French, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-TU 9AM-6PM W-TH 9AM-8PM**




VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y

 Spanish


Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T


 **Hours: M-F 8AM-5PM**

ZAIDI, NOORINA, OD


Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

FALLBROOK

ARCHIBALD, JOHN, OD

Provider Gender: Male
License Number: 11813
NPI: 1902893357
Provider English Spoken: Y
Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

COLEMAN, BROOKE, OD

Provider Gender: Female
License Number: 13551

NPI: 1700040748

Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934

After Hours Phone: (760) 728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

CONNOR, JEFFREY, OD

Provider Gender: Male
License Number: 33683
NPI: 1063968980
Provider English Spoken: Y

Spanish
Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ After Hours Phone: (760) 728-5728
 Accepting New Patients: Yes
 🗄 Site English Spoken: Y
 🗄 Site Languages(s) Spoken: Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 🕒 Hours: M-F 8AM-5PM

COOPER, MICHAEL, OD

Provider Gender: Male
 License Number: 10476
 NPI: 1164586244
 Provider English Spoken: Y
 Cultural Competency: Y
 INLAND EYE SPECIALISTS
 📍 521 E ELDER ST STE 102 FALLBROOK, CA 92028
 📞 Phone: (760) 728-5728
 Fax: (760) 728-5934
 ☎ After Hours Phone: (760) 728-5728
 Accepting New Patients: Yes
 🗄 Site English Spoken: Y
 🗄 Site Languages(s) Spoken: Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): **GEORGE, KENDALL, OD**
 N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 🕒 Hours: M-F 8AM-5PM

DUONG, CHERYL, OD

Provider Gender: Female
 License Number: 34070
 NPI: 1366935678
 Provider English Spoken: Y
 Cultural Competency: Y
 INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102 FALLBROOK, CA 92028
 📞 Phone: (760) 728-5728
 Fax: (760) 728-5934

☎ After Hours Phone: (760) 728-5728

Accepting New Patients: Yes
 🗄 Site English Spoken: Y
 🗄 Site Languages(s) Spoken: Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 🕒 Hours: M-F 8AM-5PM

Provider Gender: Male
 License Number: 34270
 NPI: 1619529948

Provider English Spoken: Y
 🗄 Site Spanish
 Cultural Competency: Y
 BRUCE D GEORGE OD

📍 1102 S MAIN AVE FALLBROOK, CA 92028
 📞 Phone: (760) 723-8417
 Fax: (760) 758-2063

☎ After Hours Phone: (760) 723-8417

Accepting New Patients: Yes
 🗄 Site English Spoken: Y
 🗄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 1PM-5PM
 TU-W 9AM-6PM
 TH-F 9AM-5PM
 SA 9AM-1PM

GEORGE, BRUCE, OD

Provider Gender: Male
 License Number: 7696
 NPI: 1356414551
 Provider English Spoken: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Korean, Spanish
 Cultural Competency: Y
 BRUCE D GEORGE OD
 1102 S MAIN AVE
 FALLBROOK, CA 92028
 Phone: (760) 723-8417
 Fax: (760) 758-2063
 After Hours Phone: (760)
 723-8417
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M 1PM-5PM
 TU-W 9AM-6PM
 TH-F 9AM-5PM
 SA 9AM-1PM

KHINDA, SUNEHA, OD

Provider Gender: Female
 License Number: 35494
 NPI: 1750066726
 Provider English Spoken: Y
 Cultural Competency: Y
 INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028
 Phone: (760) 728-5728
 Fax: (760) 728-5934

After Hours Phone: (760)
 728-5728
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

TEW, JOHN, MD

Provider Gender: Male
 License Number: A83206
 NPI: 1174593354
 Provider English Spoken: Y
 Portuguese
 Cultural Competency: Y
 INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028
 Phone: (760) 728-5728
 Fax: (760) 728-5934
 After Hours Phone: (760)
 728-5728

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender

restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male
 License Number: 6681
 NPI: 1619942034
 Provider English Spoken: Y

Spanish
 Cultural Competency: Y
 IMPERIAL BEACH

OPTOMETRY INC APC

894 PALM AVE STE B
 IMPERIAL BEACH, CA
 91932

Phone: (619) 424-9333
 Fax: (619) 424-3356

After Hours Phone: (619)
 424-9333

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM

HANONO, ABRAHAM, OD

Provider Gender: Male

License Number: 14900

NPI: 1356754741

Provider English Spoken: Y

🗣️ Hebrew, Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

📍 894 PALM AVE STE B
IMPERIAL BEACH, CA
91932

📞 Phone: (619) 424-9333

Fax: (619) 424-3356

🕒 After Hours Phone: (619)
424-9333

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM

LA JOLLA

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

CODEN, DANIEL, MD

Provider Gender: Male

License Number: G57587

NPI: 1942317508

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p> <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 8AM-4:30PM </p>	<p> <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 8AM-4:30PM </p>	<p> License Number: 14527 NPI: 1396009478 Provider English Spoken: Y Cultural Competency: Y PERLMAN OPHTHALMOLOGY-UCSD <input type="location"/> 9350 CAMPUS POINT DR STE 1B LA JOLLA, CA 92037 <input type="phone"/> Phone: (858) 534-6290 Fax: (858) 732-0921 <input type="clock"/> After Hours Phone: (858) 534-6290 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T <input type="clock"/> Hours: M-F 8AM-4:30PM </p>
<p> DEAN, MOENA, OD Provider Gender: Female License Number: 33955 NPI: 1265927578 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP <input type="location"/> 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037 <input type="phone"/> Phone: (858) 457-3010 Fax: (858) 457-0028 <input type="clock"/> After Hours Phone: (858) 457-3010 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N </p>	<p> DYER, SHARON, OD Provider Gender: Female License Number: 33450 NPI: 1063866887 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP <input type="location"/> 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037 <input type="phone"/> Phone: (858) 457-3010 Fax: (858) 457-0028 <input type="clock"/> After Hours Phone: (858) 457-3010 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 8AM-4:30PM </p>	<p> HO, AMIEE, OD Provider Gender: Female License Number: 14527 NPI: 1396009478 Provider English Spoken: Y Cultural Competency: Y UCSD SHILEY EYE CENTER <input type="location"/> 9415 CAMPUS POINT DR LA JOLLA, CA 92093 <input type="phone"/> Phone: (858) 534-6290 Fax: (858) 732-0921 </p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ *After Hours Phone: (858) 534-6290*
 Accepting New Patients: Yes
 🗣 *Site English Spoken: Y*
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 🕒 *Hours: M-F 8AM-4:30PM SA 8AM-2PM*

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y

🗣 *Spanish*
Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 📍 *9415 CAMPUS POINT DR LA JOLLA, CA 92093*
 📞 *Phone: (858) 534-6290*
Fax: (858) 732-0921

☎ *After Hours Phone: (858) 534-6290*
 Accepting New Patients: Yes
 🗣 *Site English Spoken: Y*
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 🕒 *Hours: M-F 8AM-4:30PM SA 8AM-2PM*

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y

🗣 *Spanish*
Cultural Competency: Y
 PERLMAN

OPHTHALMOLOGY-UCSD

📍 *9350 CAMPUS POINT DR STE 1B LA JOLLA, CA 92037*
 📞 *Phone: (858) 534-6290*
Fax: (858) 732-0921

☎ *After Hours Phone: (858) 534-6290*
 Accepting New Patients: Yes
 🗣 *Site English Spoken: Y*
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 🕒 *Hours: M-F 8AM-4:30PM*

HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 *9850 GENESEE AVE STE 310 LA JOLLA, CA 92037*
 📞 *Phone: (858) 457-3010*
Fax: (858) 457-0028

☎ *After Hours Phone: (858) 457-3010*

Accepting New Patients: Yes

🗣 *Site English Spoken: Y*
 🗣 *Site Languages(s) Spoken: Spanish, Tagalog*
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

🕒 *Hours: M-F 8AM-4:30PM*

HUSTANA, LARA, OD

Provider Gender: Female
License Number: 11472
NPI: 1235161597

Provider English Spoken: Y

🗣 *French*
Cultural Competency: Y

PERLMAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM
SA 8AM-2PM

JOMOC, CAITLIN, OD

Provider Gender: Female

License Number: 35009

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

SA 8AM-2PM

JOMOC, CAITLIN, OD

Provider Gender: Female

License Number: 35009

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

N

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM SA 8AM-2PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)

534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM
SA 8AM-2PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM
SA 8AM-2PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-4:30PM

LUSBY, FRANKLIN, MD

Provider Gender: Male
License Number: G41830
NPI: 1265526180
Provider English Spoken: Y
Cultural Competency: Y
LUSBY VISION INSTITUTE
📍 9850 GENESEE AVE STE
220
LA JOLLA, CA 92037
☎ Phone: (858) 459-6200
Fax: (858) 459-2025
🕒 After Hours Phone: (858)

459-6200
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 9AM-5PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
📄 Spanish
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-4:30PM
MIZOGUCHI, LIANNE, OD
Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

License Number: 10104
 NPI: 1619900313
 Provider English Spoken: Y
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-4:30PM SA 8AM-2PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female
 License Number: 10104
 NPI: 1619900313
 Provider English Spoken: Y
 Cultural Competency: Y
 PERLMAN
 OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
 STE 1B
 LA JOLLA, CA 92037
 Phone: (858) 534-6290

Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-4:30PM

MOOR, TRACY, OD

Provider Gender: Female
 License Number: 35085
 NPI: 1184283277
 Provider English Spoken: Y
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-4:30PM SA 8AM-2PM

MOOR, TRACY, OD

Provider Gender: Female
 License Number: 35085
 NPI: 1184283277
 Provider English Spoken: Y
 Cultural Competency: Y
 PERLMAN
 OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
 STE 1B
 LA JOLLA, CA 92037
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

☐ Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

PERRY, ARTHUR, MD

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE

310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

PRATT, STEVEN, MD

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM

TONNU, ANH, OD

Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
🗳 Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
📞 Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
🗳 Site English Spoken: Y
🗳 Site Languages(s) Spoken:
Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
📞 Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
🗳 Site English Spoken: Y
🗳 Site Languages(s) Spoken:
Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
🗳 Spanish
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
📞 Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
🗳 Site English Spoken: Y
🗳 Site Languages(s) Spoken:
Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM




VO, ANDREW MINH, OD

Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
🗳 Vietnamese
Cultural Competency: Y
PERLMAN





OPHTHALMOLOGY-UCSD
📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
📞 Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-4:30PM

VO, ANDREW MINH, OD



Provider Gender: Male
 License Number: 33869
 NPI: 1790291565
 Provider English Spoken: Y
 Vietnamese
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U


 Hours: M-F 8AM-4:30PM
 SA 8AM-2PM




YU, CAROL, OD

Provider Gender: Female
 License Number: 34047
 NPI: 1639697451
 Provider English Spoken: Y
 Spanish, Chinese
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-4:30PM
 SA 8AM-2PM

YU, CAROL, OD

Provider Gender: Female
 License Number: 34047
 NPI: 1639697451
 Provider English Spoken: Y
 Spanish, Chinese

Cultural Competency: Y
 PERLMAN
 OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
 STE 1B
 LA JOLLA, CA 92037
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
 License Number: 35615
 NPI: 1023477262
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE
 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Accepting New Patients: Yes N

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

LA MESA

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD

Provider Gender: Male

License Number: A147199

NPI: 1679865950

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)

465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

BAGHOUMIAN, MARINEH, OD

Provider Gender: Female

License Number: 14842

NPI: 1972929438

Provider English Spoken: Y

Armenian

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 Hours: M-F 8AM-5PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

BUI, TINA, OD

Provider Gender: Female

License Number: 33435

NPI: 1497107312

Provider English Spoken: Y


Vietnamese

Cultural Competency: Y


BUITIQUE OPTOMETRY

 5020 BALTIMORE DR STE B

LA MESA, CA 91942

 Phone: (619) 464-8303

Fax: (619) 464-4971

 After Hours Phone: (619) 464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM
SA 9AM-2PM

CAUCHI, CAROLINE

GUERRERO, OD

Provider Gender: Female

License Number: 6882

NPI: 1831268903

Provider English Spoken: Y


Spanish

Cultural Competency: Y


VISION SOLUTIONS

OPTOMETRY

 8235 UNIVERSITY AVE
LA MESA, CA 91942

 Phone: (619) 461-4913

Fax: (888) 509-6483

 After Hours Phone: (619) 461-4913

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-5:30PM
W 8AM-5PM
TH 9AM-6PM
F 8AM-1PM

CHANG, TOM, MD

Provider Gender: Male

License Number: A69909

NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

CHEW, WESLEY, OD

Provider Gender: Male

License Number: 14901

NPI: 1952714446

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

📍 7877 PARKWAY DR STE 100

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

LA MESA, CA 91942
 Phone: (619) 460-3711
 Fax: (619) 460-2184
 After Hours Phone: (619) 460-3711
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:30AM-4:30PM

CONRAD, RANDALL, OD

Provider Gender: Male
 License Number: 6423
 NPI: 1962617464
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

7877 PARKWAY DR STE 100
 LA MESA, CA 91942
 Phone: (619) 460-3711
 Fax: (619) 460-2184
 After Hours Phone: (619) 460-3711
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction
 Public transportation (within 1/2 mile from Site): 1U

American Sign Language (ASL): N
 Hours: M-F 8AM-5PM

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
 License Number: 33955
 NPI: 1265927578
 Provider English Spoken: Y
 Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
 LA MESA, CA 91942

Phone: (619) 465-2020
 Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

DEAN, MOENA, OD

Provider Gender: Female
 License Number: 33955
 NPI: 1265927578

Provider English Spoken: Y
 Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
 LA MESA, CA 91942

Phone: (619) 722-8460
 Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

DYER, SHARON, OD

Provider Gender: Female
 License Number: 33450
 NPI: 1063866887

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

🗳 German, French, Spanish
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:

Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

🗳 German, French, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

GRAY, IGA, MD

Provider Gender: Female
License Number: A174875
NPI: 1033538350
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942
☎ Phone: (619) 460-3711
Fax: (619) 460-2184
🕒 After Hours Phone: (619)
460-3711
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:30AM-4:30PM

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
☎ Phone: (619) 465-2020
Fax: (619) 698-1189
🕒 After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-5PM

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE
J
LA MESA, CA 91942
☎ Phone: (619) 722-8460

Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

HAMOUIE, JUDY, OD

Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE
J
LA MESA, CA 91942
☎ Phone: (619) 722-8460
Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction	1/2 mile from Site): 1T 🕒 Hours: M-F 8AM-5PM	NPI: 1336167618 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP 📍 7339 EL CAJON BLVD STE J LA MESA, CA 91942 📞 Phone: (619) 722-8460 Fax: (619) 722-8465 📞 After Hours Phone: (619) 722-8460 Accepting New Patients: Yes 📄 Site English Spoken: Y 📄 Site Language(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N 🗎 Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T 🕒 Hours: M-F 8AM-5PM
American Sign Language (ASL): N 🗎 Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T 🕒 Hours: M-F 8AM-5PM	HIXSON, THOMAS, OD Provider Gender: Male License Number: 7490 NPI: 1528072683 Provider English Spoken: Y Cultural Competency: Y LA MESA VISION CARE 📍 8007 LA MESA BLVD LA MESA, CA 91942 📞 Phone: (619) 466-5665 Fax: (619) 466-5688 📞 After Hours Phone: (619) 466-5665 Accepting New Patients: Yes 📄 Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N 🗎 Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U 🕒 Hours: M 8AM-4PM TU 9AM-6PM W 8AM-4PM TH 9AM-6PM F 9AM-5PM SA 8AM-1PM	
HAN, SULKI, OD Provider Gender: Female License Number: 34171 NPI: 1750802195 Provider English Spoken: Y 📄 Korean Cultural Competency: Y ACUITY EYE GROUP 📍 7339 EL CAJON BLVD STE J LA MESA, CA 91942 📞 Phone: (619) 722-8460 Fax: (619) 722-8465 📞 After Hours Phone: (619) 722-8460 Accepting New Patients: Yes 📄 Site English Spoken: Y 📄 Site Language(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N 🗎 Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U 🕒 Hours: M 8AM-4PM TU 9AM-6PM W 8AM-4PM TH 9AM-6PM F 9AM-5PM SA 8AM-1PM		
HUDSON, HENRY, MD Provider Gender: Male License Number: G76091 NPI: 1851349195 Provider English Spoken: Y Cultural Competency: Y EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP 📍 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942		
HSU, CHRISTOPHER, MD Provider Gender: Male License Number: A65973		

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 465-2020
Fax: (619) 698-1189
⌚ After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
☑ Site English Spoken: Y
☑ Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⌚ Hours: M-F 8AM-5PM

HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

⌚ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☑ Site English Spoken: Y
☑ Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

⌚ Hours: M-F 8AM-5PM

HUNG, JANICE, OD

Provider Gender: Female
License Number: 34296
NPI: 1750917936

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

⌚ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☑ Site English Spoken: Y
☑ Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

⌚ Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438

Provider English Spoken: Y

☑ Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

⌚ After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☑ Site English Spoken: Y
☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

⌚ Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y

☐ Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

KATZMAN, LEE, MD

Provider Gender: Male

License Number: A135673

NPI: 1912297284

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

📍 7877 PARKWAY DR STE 100 LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

🕒 After Hours Phone: (619) 460-3711

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:30AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

☐ Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

☐ Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

☐ Spanish, Chinese

Cultural Competency: Y

SAN DIEGO EYE

PROFESSIONALS

📍 8291 LA MESA BLVD LA MESA, CA 91942

☎ Phone: (619) 583-4295

Fax: (619) 393-1133

🕒 After Hours Phone: (619) 583-4295

Accepting New Patients: Yes



☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار



German, Spanish, Chinese
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: TU-F 9AM-5PM
SA 9AM-5PM

LEVY, PHILLIP, OD

Provider Gender: Male
License Number: 4884
NPI: 1528189115
Provider English Spoken: Y
Cultural Competency: Y
BUIRIQUE OPTOMETRY

 5020 BALTIMORE DR STE
B
LA MESA, CA 91942
 Phone: (619) 464-8303
Fax: (619) 464-4971
 After Hours Phone: (619)
464-8303

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction




American Sign Language (ASL):
N


 Accessibility: CONTACT



PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F 9AM-5PM
SA 9AM-2PM

MANNEN, JOSEPH, OD

Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

 7877 PARKWAY DR STE 100
LA MESA, CA 91942
 Phone: (619) 460-3711
Fax: (619) 460-2184
 After Hours Phone: (619)
460-3711



Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:30AM-4:30PM

MARR, RYAN, OD



Provider Gender: Male
License Number: 35302

NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP



 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE
J
LA MESA, CA 91942

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT

CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken:

Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE

J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MERALI, MURTAZA, OD

Provider Gender: Female

License Number: 14558

NPI: 1972944189

Provider English Spoken: Y

☑ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
 Indonesian, Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
 Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP
 7339 EL CAJON BLVD STE
J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

NGUYEN, THY, OD

Provider Gender: Female
License Number: 12746
NPI: 1750490413
Provider English Spoken: Y
 Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
 7339 EL CAJON BLVD STE
J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
 7877 PARKWAY DR STE 100
LA MESA, CA 91942
 Phone: (619) 460-3711
Fax: (619) 460-2184
 After Hours Phone: (619)
460-3711
Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

PANDYA, BHUMIKA, OD

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

🗣 Hindi

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🗣 Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

🗣 Gujarati, Hindi, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🗣 Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🗣 Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

PETERS, JAMIE, OD

Provider Gender: Female

License Number: 10724

NPI: 1073691077

Provider English Spoken: Y

🗣 Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

📍 8235 UNIVERSITY AVE

LA MESA, CA 91942

📞 Phone: (619) 461-4913

Fax: (888) 509-6483

📞 After Hours Phone: (619) 461-4913

Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T <input type="clock"/> Hours: M-TU 9AM-5:30PM W 8AM-5PM TH 9AM-6PM F 8AM-1PM	Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 8AM-5PM	1/2 mile from Site): 1T <input type="clock"/> Hours: M-F 8AM-5PM
PRABHU, SUJATA, MD Provider Gender: Female License Number: A115965 NPI: 1982872552 Provider English Spoken: Y <input type="checkbox"/> Spanish Cultural Competency: Y EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP <input type="location"/> 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942 <input type="phone"/> Phone: (619) 465-2020 Fax: (619) 698-1189 <input type="clock"/> After Hours Phone: (619) 465-2020 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None	PRABHU, SUJATA, MD Provider Gender: Female License Number: A115965 NPI: 1982872552 Provider English Spoken: Y <input type="checkbox"/> Spanish Cultural Competency: Y ACUITY EYE GROUP <input type="location"/> 7339 EL CAJON BLVD STE J LA MESA, CA 91942 <input type="phone"/> Phone: (619) 722-8460 Fax: (619) 722-8465 <input type="clock"/> After Hours Phone: (619) 722-8460 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T <input type="clock"/> Hours: M-F 8AM-5PM	QUACH, PHUC, OD Provider Gender: Male License Number: 12891 NPI: 1770617805 Provider English Spoken: Y <input type="checkbox"/> Spanish, Vietnamese Cultural Competency: Y ACUITY EYE GROUP <input type="location"/> 7339 EL CAJON BLVD STE J LA MESA, CA 91942 <input type="phone"/> Phone: (619) 722-8460 Fax: (619) 722-8465 <input type="clock"/> After Hours Phone: (619) 722-8460 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T <input type="clock"/> Hours: M-F 8AM-5PM
SAMUEL, MICHAEL, MD Provider Gender: Male License Number: A83237 NPI: 1730175670		

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

📄 Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

TRAN, HENRY, OD

Provider Gender: Male

License Number: 15159

NPI: 1467846709

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

TSUI, NANCY, OD

Provider Gender: Female

License Number: 33944

NPI: 1841785037

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

TU, BEVERLY, OD

Provider Gender: Female

License Number: 34108

NPI: 1053892794

Provider English Spoken: Y

🇪🇸 Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🇪🇸 Site English Spoken: Y

🇪🇸 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

📞 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

🇪🇸 Site English Spoken: Y

🇪🇸 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🇪🇸 Site English Spoken: Y

🇪🇸 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

🇪🇸 Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (619) 698-1189

☎ After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

WONG, SHARON, OD

Provider Gender: Female

License Number: 15137

NPI: 1497159552

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

YOUNG, ALLA, OD

Provider Gender: Female

License Number: 34191

NPI: 1285085142

Provider English Spoken: Y

☐ Russian

Cultural Competency: Y

ALVARADO EYE ASSOCIATES

MED CLINIC INC

📍 7877 PARKWAY DR STE 100

LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

☎ After Hours Phone: (619) 460-3711

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:30AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 8AM-5PM

LAKESIDE

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS
BLVD STE A

LAKESIDE, CA 92040

☎ Phone: (619) 443-1075

Fax: (619) 443-9382

🕒 After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TH 9AM-5PM
F 9AM-4PM

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS
BLVD STE A
LAKESIDE, CA 92040

☎ Phone: (619) 443-1075

Fax: (619) 443-9382

🕒 After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TH 9AM-5PM
F 9AM-4PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100

NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS
BLVD STE A

LAKESIDE, CA 92040

☎ Phone: (619) 443-1075

Fax: (619) 443-9382

🕒 After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TH 9AM-5PM
F 9AM-4PM

NATIONAL CITY

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

📄 Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE
FG

NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE
FG
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221
🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
☎ Phone: (619) 472-1010
Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE
FG
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

📄 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
☎ Phone: (619) 472-1010
Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction


American Sign Language (ASL):

N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM*

DEAN, MOENA, OD

*Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y*


WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*
Fax: (619) 267-8221

 *After Hours Phone: (619) 470-2700*


Accepting New Patients: Yes

 *Site English Spoken: Y*
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F 8AM-4:30PM*


DYER, SHARON, OD

*Provider Gender: Female
License Number: 33450
NPI: 1063866887*

*Provider English Spoken: Y
Cultural Competency: Y*


WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*
Fax: (619) 267-8221


 *After Hours Phone: (619) 470-2700*

Accepting New Patients: Yes


 *Site English Spoken: Y*
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F 8AM-4:30PM*


DYER, SHARON, OD

*Provider Gender: Female
License Number: 33450
NPI: 1063866887*

*Provider English Spoken: Y
Cultural Competency: Y*

ACUITY EYE GROUP



 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 *Phone: (619) 472-1010*

Fax: (619) 479-5233

 *After Hours Phone: (619) 472-1010*


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM*

GOLLOGLY, HEIDRUN, MD


*Provider Gender: Female
License Number: A134761
NPI: 1477879823*

Provider English Spoken: Y

 *German, French, Spanish*
Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 *Phone: (619) 472-1010*
Fax: (619) 479-5233

 *After Hours Phone: (619) 472-1010*

Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken:*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM

F 8AM-5PM

HUNG, JANICE, OD

Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

2240 E PLAZA BLVD STE
FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Hindi

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE
FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE
FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE
FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL): F 8AM-5PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777


NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y


Spanish

Cultural Competency: Y


LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

LEE, AUSTIN, OD

Provider Gender: Male

License Number: 14519


NPI: 1922356914

Provider English Spoken: Y

Cultural Competency: Y

VIVE OPTOMETRY

 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 477-2771

Fax: (619) 477-1680

 After Hours Phone: (619)
477-2771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: TU 10AM-5PM
W-F 9:30AM-5PM

LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

Spanish, Chinese

Cultural Competency: Y

SAN DIEGO EYE

PROFESSIONALS

 2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 583-4295

Fax: (619) 825-7300

🕒 After Hours Phone: (619) 583-4295

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: TH-F 9AM-5PM

MARLAY, GREG, OD

Provider Gender: Male

License Number: 6998

NPI: 1306903083

Provider English Spoken: Y

Cultural Competency: Y

MARLAY ENTERPRISES

📍 1132 E PLAZA BLVD STE 201 NATIONAL CITY, CA 91950

☎ Phone: (619) 477-4166

🕒 After Hours Phone: (619) 477-4166

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM

W 10AM-6PM

F 10AM-6PM

SA 10AM-2PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

MENDOZA, RAYMUNDO, OD

Provider Gender: Male
License Number: 8150
NPI: 1306837760
Provider English Spoken: Y
Spanish
Cultural Competency: Y
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 475-2184
Fax: (619) 475-3917
After Hours Phone: (619) 475-2184
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TU 10AM-5PM
TH-F 10AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
☐ Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
☎ Phone: (619) 472-1010
Fax: (619) 479-5233
🕒 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

NGUYEN, THERESA, OD

Provider Gender: Female
License Number: 35530TLG

NPI: 1609555713
Provider English Spoken: Y
Cultural Competency: Y
LUSTRO EYEWORKS
OPTOMETRY
📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
☎ Phone: (619) 477-2159
Fax: (619) 477-2128
🕒 After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Arabic, Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221
🕒 After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
☐ Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-4:30PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
☐ Gujarati, Hindi, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221
🕒 After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
☐ Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


restriction

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG


NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434


Provider English Spoken: Y

Cultural Competency: Y


WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG


NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476


Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG


NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700


Accepting New Patients: Yes

 Site English Spoken: Y
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP



 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL): Public transportation (within
N 1/2 mile from Site): 1T

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

🗃 Arabic

Cultural Competency: Y

LUSTRO EYEWORKS
OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

📞 Phone: (619) 477-2159

Fax: (619) 477-2128

📞 After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

🗃 Site English Spoken: Y

🗃 Site Languages(s) Spoken:
Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE
FG
NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700

Fax: (619) 267-8221

📞 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

🗃 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

📞 Phone: (619) 472-1010

Fax: (619) 479-5233

📞 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

🗃 Site English Spoken: Y

🗃 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

🗃 Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 472-1010
Fax: (619) 479-5233

🕒 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

WU, EVA, OD

Provider Gender: Female

License Number: 14743

NPI: 1073954442

Provider English Spoken: Y

☐ Spanish, Chinese

Cultural Competency: Y

VIVE OPTOMETRY

📍 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2771
Fax: (619) 477-1680

🕒 After Hours Phone: (619) 477-2771

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: TU 10AM-5PM
W-F 9:30AM-5PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female








License Number: 35615



NPI: 1023477262






Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار



Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
 Fax: (619) 479-5233
 After Hours Phone: (619)
 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
Min/Max Age: 0\None
*Gender Restriction: No Gender
 restriction*
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
*Public transportation (within
 1/2 mile from Site): 1T*
 Hours: M-TU 8AM-6PM
 W 8:30AM-5PM
 TH 8AM-6PM
 F 8AM-5PM







ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
 Fax: (619) 479-5233

 After Hours Phone: (619)
 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
Min/Max Age: 0\None
*Gender Restriction: No Gender
 restriction*
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
*Public transportation (within
 1/2 mile from Site): 1T*
 Hours: M-TU 8AM-6PM
 W 8:30AM-5PM
 TH 8AM-6PM
 F 8AM-5PM

OCEANSIDE

KASAI, SARAH, OD
Provider Gender: Female
License Number: 34226
NPI: 1023406238
Provider English Spoken: Y
Cultural Competency: Y
NORTH COAST OPTOMETRY
 3915 MISSION AVE STE 2
 OCEANSIDE, CA 92058
 Phone: (760) 757-8771
 After Hours Phone: (760)
 757-8771
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

Min/Max Age: 0\None
*Gender Restriction: No Gender
 restriction*
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
*Public transportation (within
 1/2 mile from Site): 1T*
 Hours: M-TU 9AM-6PM
 W 10AM-7PM
 TH 9AM-6PM
 F 9AM-5PM

NISKANEN, RACHEL, OD
Provider Gender: Female
License Number: 34663
NPI: 1467065797
Provider English Spoken: Y
Cultural Competency: Y
NORTH COAST OPTOMETRY
 3915 MISSION AVE STE 2
 OCEANSIDE, CA 92058
 Phone: (760) 757-8771
 After Hours Phone: (760)
 757-8771
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
Min/Max Age: 0\None
*Gender Restriction: No Gender
 restriction*
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

🗣️ Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

📍 3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

📞 Phone: (760) 757-8771

🕒 After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

RAMONA

HOMESLEY, SUSAN, OD

Provider Gender: Female

License Number: 6693

NPI: 1720068984

Provider English Spoken: Y

🗣️ Spanish

Cultural Competency: Y

SUSAN D HOMESLEY OD

📍 1516 MAIN ST STE 102
RAMONA, CA 92065

📞 Phone: (760) 789-0950

Fax: (760) 789-6057

🕒 After Hours Phone: (760)
789-0950

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM
SA 8AM-11AM

SAN DIEGO

ACKROYD, ARCHIE, OD

Provider Gender: Male

License Number: 4774

NPI: 1629107172

Provider English Spoken: Y

Cultural Competency: Y

VAN HOOSE OPTOMETRIC
CORPORATION

📍 7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111

📞 Phone: (858) 292-7193

Fax: (858) 292-8247

🕒 After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (858) 966-8901

☎ After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 7AM-5PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

☐ Spanish, Vietnamese Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

☐ Spanish, Vietnamese Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

☎ Phone: (858) 487-7900

Fax: (858) 487-1896

☎ After Hours Phone: (858) 487-7900

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM
SA 8:30AM-2PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

☐ Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 Fax: (858) 966-8901
 After Hours Phone: (858) 309-7702
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 7AM-5PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

6945 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600
 Accepting New Patients: Yes
 Site English Spoken: Y

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
 TU 8AM-5PM
 W 8:30AM-5PM
 TH 8AM-6PM
 F 8AM-4PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822
 Accepting New Patients: Yes

Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10AM-6PM
 TU 8:30AM-5PM
 W 7:30AM-4PM
 TH 9:30AM-5PM
 F 8AM-4PM

BEAUDRY, AMANDA, OD

Provider Gender: Female
License Number: 33385
NPI: 1477903516

Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 Fax: (858) 966-8901
 After Hours Phone: (858) 309-7702

Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

BERGMARK, JAMIE, OD

Provider Gender: Female

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702
Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License Number: A154902
NPI: 1104237353

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702
Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600
Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

BOECK, CARL, OD

Provider Gender: Male

License Number: 6620

NPI: 1588656151

Provider English Spoken: Y

☐ German, Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

📍 7246 CLAIREMONT MESA BLVD

SAN DIEGO, CA 92111

☎ Phone: (858) 292-7193

Fax: (858) 292-8247

🕒 After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 8AM-5PM

TU-TH 9AM-6PM

F 8AM-5PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

📍 5638 MISSION CENTER RD STE 103

SAN DIEGO, CA 92108

☎ Phone: (619) 295-2900

Fax: (888) 210-5799

🕒 After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM

SA 9AM-3PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE OPTOMETR

📍 7007 FRIARS RD STE 351 SAN DIEGO, CA 92108

☎ Phone: (619) 291-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619) 291-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 10AM-7PM

SA 10AM-7PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

📍 1555 PALM AVE STE A2 SAN DIEGO, CA 92154

☎ Phone: (619) 297-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619) 297-2020

Accepting New Patients: Yes


☐ Site English Spoken: Y

Min/Max Age: 0\None

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


Gender Restriction: No Gender restriction
Public transportation (within 1/2 mile from Site): 1T

American Sign Language (ASL):  Hours: M-TU 9AM-5PM
W 10AM-6PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 9:30AM-6PM
SA 9AM-3PM

CHAIN, PEI CHI, OD

Provider Gender: Female

License Number: 34439

NPI: 1730676727

Provider English Spoken: Y


 Spanish, Chinese

Cultural Competency: Y

SPOTLIGHT OPTOMETRY

 7835 HIGHLANDS VLG PL
D 106

SAN DIEGO, CA 92129


 Phone: (858) 250-0052

Fax: (858) 788-0287

 After Hours Phone: (858)
250-0052

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL): 1/2 mile from Site): 1T

N

 Accessibility: CONTACT
PROVIDER

CHEN, LESLIE, OD

Provider Gender: Female

License Number: 12792

NPI: 1508953332


Provider English Spoken: Y

 Chinese


Cultural Competency: Y

EYE STUDIO OPTOMETRY

 4475 UNIVERSITY AVE
SAN DIEGO, CA 92105


 Phone: (619) 521-2020

Fax: (619) 521-2025

 After Hours Phone: (619)
521-2020

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

 Hours: M-W 9AM-5PM

TH 9AM-1:30PM

F 9AM-5PM

SA 9AM-1PM

COLEMAN, BROOKE, OD

Provider Gender: Female

License Number: 13551

NPI: 1700040748


Provider English Spoken: Y

Cultural Competency: Y


EYELUX OPTOMETRY

 16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

 Phone: (858) 487-7900

Fax: (858) 487-1896

 After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM
SA 8:30AM-2PM

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

 16615 DOVE CANYON RD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

STE 105
SAN DIEGO, CA 92127
☎ Phone: (858) 487-7900
Fax: (858) 487-1896
📞 After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-5PM
SA 8:30AM-2PM

DAVIS, JADE, OD

Provider Gender: Female
License Number: 11765
NPI: 1457303398
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
📍 5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
☎ Phone: (619) 295-2900
Fax: (888) 210-5799
📞 After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 9AM-5:30PM
SA 9AM-3PM

DAVIS, JADE, OD

Provider Gender: Female
License Number: 11765
NPI: 1457303398
Provider English Spoken: Y
Cultural Competency: Y
FASHION VALLEY EYE CARE
OPTOMETR
📍 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108
☎ Phone: (619) 291-2020
Fax: (888) 210-5799
📞 After Hours Phone: (619) 291-2020
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F 10AM-7PM
SA 10AM-7PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
Fax: (858) 565-2449
📞 After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

DUONG, KIM, OD

Provider Gender: Female
License Number: 34222
NPI: 1114448651

Provider English Spoken: Y

Vietnamese
Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD

STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM
SA 8:30AM-2PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

GIANG, STEVEN, OD

Provider Gender: Male

License Number: 34489

NPI: 1730710104

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300
SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

🕒 After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM
SA 9AM-1PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4PM

HO, HOANG, OD

Provider Gender: Male

License Number: 12582

NPI: 1275684847

Provider English Spoken: Y

Cultural Competency: Y

HEALTHY I CARE OPTOMETRY

📍 10737 CAMINO RUIZ STE
220

SAN DIEGO, CA 92126

☎ Phone: (619) 590-1994

🕒 After Hours Phone: (619)
590-1994

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: TH-F 9AM-5PM

HOANG, KEVIN, OD

Provider Gender: Male

License Number: 34401

NPI: 1790339216

Provider English Spoken: Y

🗳 Site Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300
SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

🕒 After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM
SA 9AM-1PM

HOFFMAN, STEVEN, OD

Provider Gender: Male

License Number: 34561

NPI: 1033736079

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300
SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

🕒 After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM
SA 9AM-1PM

HOM, GREGORY, OD

Provider Gender: Male

License Number: 9694

NPI: 1154473916

Provider English Spoken: Y

Cultural Competency: Y

GREGORY G HOM OD

📍 11230 SORRENTO VLY RD
STE 145

SAN DIEGO, CA 92121

☎ Phone: (858) 535-9835

Fax: (858) 535-1266

🕒 After Hours Phone: (858)

535-9835

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TH 9AM-5PM
F 9AM-4PM

HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

🗳 Site Spanish

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗳 Site English Spoken: Y



Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8AM-4PM**


HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 697-4600
Fax: (619) 697-2410


 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes


Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1U

 **Hours: M 7:30AM-4:30PM**
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y


French

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (619) 543-6244

Fax: (619) 295-5034

 After Hours Phone: (619) 543-6244


Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-4PM**

HUYNH, LOAN, OD

Provider Gender: Female

License Number: 34472

NPI: 1003454604

Provider English Spoken: Y


Vietnamese

Cultural Competency: Y

NORTH COUNTY OPTOMETRY

 11835 CARMEL MTN RD
STE 1313

SAN DIEGO, CA 92128

 Phone: (858) 674-1276

Fax: (858) 674-5863

 After Hours Phone: (858) 674-1276

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M 9AM-4PM**

TU 7AM-1PM

W-TH 10AM-6PM

F 10AM-3PM

SA 9AM-2PM

HUYNH, CHI, OD

Provider Gender: Female

License Number: 12901

NPI: 1922187426

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

CRYSTAL EYESITE

OPTOMETRY

 9225 MIRA MESA BLVD STE
108

SAN DIEGO, CA 92126

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (858) 547-3988

Fax: (844) 367-5161

🕒 After Hours Phone: (858) 547-3988

Accepting New Patients: Yes

☑ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:30AM-6PM
W 9:30AM-6PM
TH-F 10AM-6PM
SA 9AM-3PM

HUYNH, PAUL, MD

Provider Gender: Male

License Number: A79141

NPI: 1871577056

Provider English Spoken: Y

☑ Vietnamese

Cultural Competency: Y

ADVANCED EYE AND LASER CTR OF CA INC

📍 10737 CAMINO RUIZ STE 100

SAN DIEGO, CA 92126

☎ Phone: (858) 549-3200

Fax: (858) 549-3207

🕒 After Hours Phone: (858) 549-3200

Accepting New Patients: Yes

☑ Site English Spoken: Y N

☑ Site Language(s) Spoken: Spanish, Tagalog, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

HUYNH, PAUL, MD

Provider Gender: Male

License Number: A79141

NPI: 1871577056

Provider English Spoken: Y

☑ Vietnamese

Cultural Competency: Y

ADVANCED EYE AND LASER CTR OF CA INC

📍 4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105

☎ Phone: (619) 283-1303

Fax: (619) 283-1666

🕒 After Hours Phone: (619) 283-1303

Accepting New Patients: Yes

☑ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

JOMOC, CAITLIN, OD

Provider Gender: Female

License Number: 35009

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619) 543-6244

Accepting New Patients: Yes

☑ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4PM

JOMOC, CAITLIN, OD

Provider Gender: Female

License Number: 35009

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2

SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes N

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM

TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

KATZMAN, BARRY, MD

Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y

Spanish
Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

KHALIGHI, PAYMAN, OD

Provider Gender: Male

License Number: 13014
NPI: 1396897880
Provider English Spoken: Y

Spanish
Cultural Competency: Y
JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105
 Phone: (619) 284-3937
Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM
SA 9AM-1PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y
 Arabic
Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 697-4600
Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y
 Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

KHAN, FAHAD, MD

Provider Gender: Male

License Number: A163142

NPI: 1548605843

Provider English Spoken: Y

🗣️ Hindi

Cultural Competency: Y

VISION SPECIALISTS OF CALIFORNIA

📍 233 LEWIS ST
SAN DIEGO, CA 92103

☎️ Phone: (619) 501-9050

Fax: (619) 501-9054

📞 After Hours Phone: (619) 501-9050

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken: Bengali, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH 8AM-5PM
F 8AM-4PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎️ Phone: (858) 565-8822

Fax: (858) 565-2449

📞 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM

F 8AM-4PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎️ Phone: (619) 697-4600

Fax: (619) 697-2410

📞 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM
SA 8:30AM-2PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

HILLCREST EYE CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244
Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782

Provider English Spoken: Y

Spanish

Cultural Competency: Y

UPTOWN OPTOMETRY

4096 PARK BLVD
SAN DIEGO, CA 92103

Phone: (619) 291-5505
Fax: (619) 291-4404

After Hours Phone: (619)
291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU-F 9AM-3PM
SA 10AM-2PM

LAU, JANICE, OD

Provider Gender: Female

License Number: 13037

NPI: 1952453300

Provider English Spoken: Y

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128

Phone: (858) 748-1265
Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU 9AM-5PM
W 10AM-6PM
TH 9AM-5PM
F 10AM-6PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900
Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 9AM-5:30PM
SA 9AM-3PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

📍 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

☎ Phone: (619) 291-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 10AM-7PM
SA 10AM-7PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

📍 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

☎ Phone: (619) 297-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

📄 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM
SA 9AM-3PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

📄 Spanish

Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

📄 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 7AM-5PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

📄 Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

📍 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

☎ Phone: (619) 297-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619)
297-2020

Accepting New Patients: Yes



📄 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 9:30AM-6PM SA 9AM-3PM**

LIN, HENRY, OD


Provider Gender: Male
License Number: 11368
NPI: 1861405664
Provider English Spoken: Y
 Spanish, Chinese
Cultural Competency: Y
FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108
 Phone: (619) 291-2020
Fax: (888) 210-5799
 After Hours Phone: (619) 291-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 **Accessibility: CONTACT PROVIDER**



Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 10AM-7PM SA 10AM-7PM**

LIN, HENRY, OD



Provider Gender: Male
License Number: 11368
NPI: 1861405664
Provider English Spoken: Y

 Spanish, Chinese
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY

 5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
 Phone: (619) 295-2900
Fax: (888) 210-5799

 After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**


Public transportation (within 1/2 mile from Site): 1U


 **Hours: M-F 9AM-5:30PM SA 9AM-3PM**


LLANES, BENJAMIN, OD

Provider Gender: Male
License Number: 8782
NPI: 1053309005

Provider English Spoken: Y



 Spanish, Tagalog
Cultural Competency: Y
SEE KLEER EYECARE CENTER

 9580 BLACK MOUNTAIN RD STE J
SAN DIEGO, CA 92126

 Phone: (858) 536-8952
Fax: (858) 536-8951

 After Hours Phone: (858) 536-8952


Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-TH 11AM-6PM F 1PM-5PM SA 9AM-1PM**

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

📞 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

🗣 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

📞 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

🗣 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM

TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y

🗣 Spanish

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

📞 After Hours Phone: (619) 543-6244

Accepting New Patients: Yes

🗣 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y

🗣 Spanish

Cultural Competency: Y

UC SAN DIEGO HEALTH

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

📞 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗣 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619)

697-4600

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 7AM-5PM

MOOR, TRACY, OD

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244
Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)

534-6290

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish
Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish
Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM

TU 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

NGUYEN, THANH, OD

Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128

Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU 9AM-5PM
W 10AM-6PM
TH 9AM-5PM
F 10AM-6PM

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

CLAIREMONT OPTOMETRY

10715 TIERRASANTA BLVD
STE F

SAN DIEGO, CA 92124

Phone: (858) 279-6500

Fax: (858) 225-7174

After Hours Phone: (858)
279-6500

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-W 9AM-6PM
TH-F 9AM-5PM
SA 8AM-3PM

NGUYEN, KELVIN, OD

Provider Gender: Male

License Number: 11085

NPI: 1518923572

Provider English Spoken: Y

Spanish

Cultural Competency: Y

SD VISION CARE OPTOMETRY

3807 FAIRMOUNT AVE STE
200

SAN DIEGO, CA 92105

Phone: (619) 508-5678

Fax: (619) 501-0686

After Hours Phone: (619)
508-5678

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

SD VISION CARE OPTOMETRY

3807 FAIRMOUNT AVE STE
200

SAN DIEGO, CA 92105

Phone: (619) 508-5678

Fax: (619) 501-0686

After Hours Phone: (619)
508-5678

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

NGUYEN, JASMINE, OD

Provider Gender: Female
 License Number: 11189


NPI: 1497896922


Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

 4029 43RD ST STE 300
 SAN DIEGO, CA 92105

 Phone: (619) 284-3937

Fax: (619) 284-3938

 After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM
 SA 9AM-1PM

NGUYEN, THANH, OD

Provider Gender: Female

License Number: 13126

NPI: 1992813323


Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

 4029 43RD ST STE 300
 SAN DIEGO, CA 92105

 Phone: (619) 284-3937

Fax: (619) 284-3938

 After Hours Phone: (619) 284-3937

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM
 SA 9AM-1PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y


German, Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 7910 FROST ST STE 200
 SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-8901

 After Hours Phone: (858) 309-7702


Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 7AM-5PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326


Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115

 Phone: (619) 697-4600

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (619) 697-2410

☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

☐ Gujarati, Hindi, Spanish
Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PHAM, TONY, OD

Provider Gender: Male

License Number: 12348

NPI: 1841271434

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

MIRA MESA EYECARE

6755 MIRA MESA BLVD STE 141

SAN DIEGO, CA 92121

Phone: (858) 535-8282

Fax: (858) 535-0537

After Hours Phone: (858) 535-8282

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 9:30AM-6PM TH-F 9:30AM-6PM

PHUNG, RICHARD N V, OD

Provider Gender: Male

License Number: 9547

NPI: 1689661571

Provider English Spoken: Y

Vietnamese, Chinese

Cultural Competency: Y

SCRIPPS RANCH OPTOMETRI CTR

9880 HIBERT ST STE E1 SAN DIEGO, CA 92131

Phone: (858) 693-9044

Fax: (858) 693-0704

After Hours Phone: (858) 693-9044

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 10AM-2PM

W-TH 10AM-6PM

F 9AM-2PM

SA 9AM-2PM

POUSTI, SHEIVA, OD

Provider Gender: Female

License Number: 10403

NPI: 1730240052

Provider English Spoken: Y

Cultural Competency: Y

SAN DIEGO EYE CLINIC

OPTOMETRY

3560 FAIRMOUNT AVE STE

A

SAN DIEGO, CA 92105

Phone: (619) 431-2020

Fax: (619) 376-2100

After Hours Phone: (619) 431-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: SU-SA 9AM-6PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2 SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes


Site English Spoken: Y

Min/Max Age: 0\None

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction
Public transportation (within 1/2 mile from Site): 1U

American Sign Language (ASL):  Hours: M 7:30AM-4:30PM
TU 8AM-5PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552


Provider English Spoken: Y

 Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 697-4600

Fax: (619) 697-2410

 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes


 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

SANDOC, EMILY, OD

Provider Gender: Female

License Number: 13535

NPI: 1992969794


Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108


 Phone: (619) 295-2900

Fax: (888) 210-5799

 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 9AM-5:30PM

SA 9AM-3PM

SHULKIN, MITCHELL, OD

Provider Gender: Male

License Number: 8153

NPI: 1770531865


Provider English Spoken: Y

Cultural Competency: Y

NORTH COUNTY OPTOMETRY

 11835 CARMEL MTN RD
STE 1313

SAN DIEGO, CA 92128


 Phone: (858) 674-1276

Fax: (858) 674-5863

 After Hours Phone: (858)
674-1276

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9AM-4PM

TU 7AM-1PM

W-TH 10AM-6PM

F 10AM-3PM

SA 9AM-2PM

TA, TRANG, OD

Provider Gender: Female

License Number: 12100

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

NPI: 1518381045

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300

SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-5PM SA 9AM-1PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

5638 MISSION CENTER RD

STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM SA 9AM-3PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Spanish

Cultural Competency: Y

FASHION VALLEY EYE CARE

OPTOMETR

7007 FRIARS RD STE 351

SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619) 291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 10AM-7PM SA 10AM-7PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

1555 PALM AVE STE A2

SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619) 297-2020

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None



Gender Restriction: No Gender restriction

American Sign Language (ASL):






N



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 9:30AM-6PM SA 9AM-3PM**

TILLMAN, SYLVIA, OD

Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
 4029 43RD ST STE 300
SAN DIEGO, CA 92105
 Phone: (619) 284-3937
Fax: (619) 284-3938
 After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N


 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 9AM-5PM SA 9AM-1PM**



TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822



Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M 10AM-6PM TU 8:30AM-5PM W 7:30AM-4PM TH 9:30AM-5PM F 8AM-4PM**

TON-NU, MY LINH, OD


Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE




 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM**

TONNU, ANH, OD

Provider Gender: Female
License Number: 11318
NPI: 1679521280

Provider English Spoken: Y
 Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600
Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

TRANG, CHAU, OD

Provider Gender: Female

License Number: 9556

NPI: 1073671087

Provider English Spoken: Y

French, Spanish, Vietnamese, Chinese

Cultural Competency: Y

CHAU H TRANG OD

6947 LINDA VISTA RD STE A

SAN DIEGO, CA 92111

Phone: (858) 495-0592

Fax: (858) 495-0560

After Hours Phone: (858) 495-0592

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: French, Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 10AM-3PM
W 10AM-3PM
F 10AM-5PM
SA 9AM-1PM

VAN HOOSE, MARC, OD

Provider Gender: Male

License Number: 12667

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

NPI: 1932280054

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

7246 CLAIREMONT MESA BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619) 543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

WONG, GORDON, OD

Provider Gender: Male

License Number: 9832

NPI: 1447338447

Provider English Spoken: Y

Cultural Competency: Y

UPTOWN OPTOMETRY

4096 PARK BLVD
SAN DIEGO, CA 92103

Phone: (619) 291-5505

Fax: (619) 291-4404

After Hours Phone: (619) 291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish



Min/Max Age: 0\None

Gender Restriction: No Gender restriction


American Sign Language (ASL): N



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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: TU-F 9AM-3PM SA 10AM-2PM**



YU, CAROL, OD

Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
 **Spanish, Chinese**
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 **Phone: (619) 543-6244**
Fax: (619) 295-5034

 **After Hours Phone: (619) 543-6244**
Accepting New Patients: Yes
 **Site English Spoken: Y**
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):
N


 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8AM-4PM**


ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 **Phone: (858) 565-8822**
Fax: (858) 565-2449

 **After Hours Phone: (858) 565-8822**

Accepting New Patients: Yes
 **Site English Spoken: Y**
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1U


 **Hours: M 10AM-6PM TU 8:30AM-5PM W 7:30AM-4PM TH 9:30AM-5PM F 8AM-4PM**

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262


Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115


 **Phone: (619) 697-4600**
Fax: (619) 697-2410

 **After Hours Phone: (619) 697-4600**

Accepting New Patients: Yes

 **Site English Spoken: Y**
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U


 **Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM**

ZHAO, TAILUN, MD


Provider Gender: Male
License Number: C186414
NPI: 1952659203

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 **Phone: (858) 565-8822**
Fax: (858) 565-2449

 **After Hours Phone: (858) 565-8822**

Accepting New Patients: Yes

 **Site English Spoken: Y**
Min/Max Age: 0\None

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

SAN MARCOS

GARFF, KEVIN, MD

Provider Gender: Male

License Number: A160988

NPI: 1609258920

Provider English Spoken: Y

🗳 Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

📍 100 N RANCHO SNTA FE RD STE 12

SAN MARCOS, CA 92069

☎ Phone: (760) 598-0400

Fax: (760) 249-7394

📞 After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken: Spanish, Thai

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

GUAN, HOWARD, MD

Provider Gender: Male

License Number: A119766

NPI: 1134427636

Provider English Spoken: Y

🗳 Spanish, Chinese

Cultural Competency: Y

RSF OPHTHALMOLOGY

📍 100 N RANCHO SNTA FE RD STE 12

SAN MARCOS, CA 92069

☎ Phone: (760) 598-0400

Fax: (760) 249-7394

📞 After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken: Spanish, Thai

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

PRESTERA, TORY, MD

Provider Gender: Male

License Number: A62321

NPI: 1346224557

Provider English Spoken: Y

🗳 Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

📍 100 N RANCHO SNTA FE RD STE 12

SAN MARCOS, CA 92069

☎ Phone: (760) 598-0400

Fax: (760) 249-7394

📞 After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken: Spanish, Thai

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

SKAY, RICHARD, OD

Provider Gender: Male

License Number: 7649

NPI: 1639251945

Provider English Spoken: Y

Cultural Competency: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

RICHARD M SKAY OD

1903 W SAN MARCOS
BLVD STE 130
SAN MARCOS, CA 92078
Phone: (760) 727-2211
Fax: (760) 727-2533

After Hours Phone: (760)
727-2211

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 9AM-3PM

TA, MINI, OD

Provider Gender: Female

License Number: 15170

NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078
Phone: (760) 736-0020
Fax: (760) 736-0019

After Hours Phone: (760)
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL): 1/2 mile from Site): 1T

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9AM-5PM

TU 9AM-6PM

W 9AM-5PM

TH 9AM-6PM

F 9AM-5PM

THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078
Phone: (760) 736-0020
Fax: (760) 736-0019

After Hours Phone: (760)
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

Hours: M 9AM-5PM

TU 9AM-6PM

W 9AM-5PM

TH 9AM-6PM

F 9AM-5PM

TRAN, MICHAEL, OD

Provider Gender: Male

License Number: 14530

NPI: 1649524216

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078
Phone: (760) 736-0020
Fax: (760) 736-0019

After Hours Phone: (760)
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

SPRING VALLEY

FLEMING, JOHN, OD

Provider Gender: Male
License Number: 8461
NPI: 1033192133
Provider English Spoken: Y
Cultural Competency: Y
JOHN C FLEMING OD
📍 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977
📞 Phone: (619) 463-9318
Fax: (619) 463-9640
🕒 After Hours Phone: (619)
463-9318
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 9AM-5:30PM
W-TH 9AM-5PM
F 9AM-4PM

HOANG, KENNY, OD

Provider Gender: Male
License Number: 35207
NPI: 1740868603
Provider English Spoken: Y
Cultural Competency: Y
JOHN C FLEMING OD
📍 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977
📞 Phone: (619) 463-9318
Fax: (619) 463-9640
🕒 After Hours Phone: (619)
463-9318
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 9AM-5PM
TU 9AM-5:30PM
W-TH 9AM-5PM
F 9AM-4PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male
License Number: 15100
NPI: 1568861425
Provider English Spoken: Y
Cultural Competency: Y
JOHN C FLEMING OD
📍 9628 CAMPO RD STE C

SPRING VALLEY, CA 91977

📞 Phone: (619) 463-9318
Fax: (619) 463-9640
🕒 After Hours Phone: (619)
463-9318
Accepting New Patients: Yes
📄 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 9AM-5PM
TU 9AM-5:30PM
W-TH 9AM-5PM
F 9AM-4PM

KALRA, ANKUR, OD

Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
📄 Hindi
Cultural Competency: Y
EYE CARE OPTOMETRY
ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977
📞 Phone: (619) 466-9444
Fax: (619) 466-9314
🕒 After Hours Phone: (619)
466-9444
Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM	American Sign Language (ASL): <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM	<input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM NGUYEN, THERESA, OD Provider Gender: Female License Number: 35530TLG NPI: 1609555713 Provider English Spoken: Y Cultural Competency: Y EYE CARE OPTOMETRY ASSOCIATES <input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM
KEDDINGTON, JOAN, OD Provider Gender: Female License Number: 6263 NPI: 1992872691 Provider English Spoken: Y <input type="checkbox"/> Spanish Cultural Competency: Y EYE CARE OPTOMETRY ASSOCIATES <input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction	KING, MARY, OD Provider Gender: Female License Number: 13711 NPI: 1578792107 Provider English Spoken: Y <input type="checkbox"/> Spanish Cultural Competency: Y EYE CARE OPTOMETRY ASSOCIATES <input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U	<input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM
<input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction	<input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U	SOLIS, KEVIN, OD Provider Gender: Male License Number: 10420 NPI: 1538362116

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 9AM-6PM
SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Arabic

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 9AM-6PM
SA 9AM-5PM

VALLEY CENTER

JOYCE, ROBERT, OD

Provider Gender: Male

License Number: 11833

NPI: 1275585127

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082

Phone: (760) 751-8771

Fax: (760) 751-8772

After Hours Phone: (760)
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-6PM
TU-F 9AM-5PM

LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

29115 VALLEY CENTER RD
STE E

VALLEY CENTER, CA 92082

Phone: (760) 751-8771

Fax: (760) 751-8772

After Hours Phone: (760)
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL): 1/2 mile from Site): 1T

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-6PM
TU-F 9AM-5PM

VISTA

DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518


Provider English Spoken: Y


 Spanish

Cultural Competency: Y

SHADOWRIDGE FAMILY

VISION

 741 SHADOWRIDGE DR
VISTA, CA 92083


 Phone: (760) 727-1844

Fax: (760) 727-3044

 After Hours Phone: (760)
727-1844

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within

 Hours: M-TU 9AM-6PM
W 7AM-5PM
TH 9AM-6PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948


Provider English Spoken: Y

 Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

 931 ANZA AVE STE B
VISTA, CA 92084


 Phone: (760) 758-2340

Fax: (760) 867-2222

 After Hours Phone: (760)
758-2340

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551


Provider English Spoken: Y

 Korean, Spanish


Cultural Competency: Y

BRUCE D GEORGE OD


 931 ANZA AVE STE B
VISTA, CA 92084


 Phone: (760) 758-2340

Fax: (760) 867-2222

 After Hours Phone: (760)
758-2340

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y

 Vietnamese

Cultural Competency: Y

KINDERSPECS-GOOD EYES

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمى خدمات الإبصار - خدمات العين والإبصار

OPTOMETRY

📍 110 CIVIC CENTER DR STE
204

VISTA, CA 92084

☎ Phone: (760) 753-3665

Fax: (408) 969-1653

🕒 After Hours Phone: (760)
753-3665

Accepting New Patients: Yes

🗺 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

🕒 Hours: M-TH 10AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

جدول ECM للمجموعة محل التركيز (POF)

الأطفال والشباب	البالغون	جدول ECM للمجموعة محل التركيز
✓	✓	1 لأفراد الذين يعانون التشرد 
✓	✓	2 الأفراد المعرضون لخطر استخدام المستشفى أو قسم الطوارئ (ED) الذي يمكن تجنبه (يطلق عليهم رسميًا "المستخدمون المرتفعون") 
✓	✓	3 لأفراد الذين يعانون اضطرابات عقلية خطيرة و/أو اضطرابات تعاطي المخدرات 
✓	✓	4 لأفراد الذين ينتقلون من السجن 
	✓	5 البالغون الذين يعيشون في المجتمع والمعرضون لخطر الرعاية طويلة الأجل (LTC) المؤسسية 
	✓	6 المقيمون في مرافق تمريض البالغين الذين ينتقلون إلى المجتمع 
✓		7 الأطفال والشباب المسجلون في خدمات الأطفال في California (CCS) أو نموذج CCS للطفل الشامل (WCM) مع احتياجات إضافية تتجاوز حالة CCS 
✓		8 الأطفال والشباب المشاركون في Child Welfare لرعاية الطفل 
✓	✓	9 المجموعة محور التركيز التابعة لـ Birth Equity لعدالة الولادة 

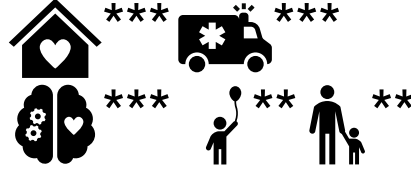
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

CORONA

TANGELO

1701 N DELILAH ST
CORONA, CA 92879
Phone: (904) 671-2995
After Hours Phone: (904) 671-2995
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services:
Medically-Supportive
Food/Meals/Medically
Tailored Meals
Street Medicine Provider: N
Email for New Referrals and Existing Patients:
CHRIS.OCONNOR@JOINTANGELO.COM
Phone for New Referrals and Existing Patients: (904) 671-2995

Phone: (323) 203-0070
After Hours Phone: (323) 203-0070
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients:
ecm@mymedzed.com
Phone for New Referrals and Existing Patients: (323) 203-0070

STE 465
CULVER CITY, CA 90230
Phone: (323) 203-0070
After Hours Phone: (323) 203-0070
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients:
ecm@mymedzed.com
Phone for New Referrals and Existing Patients: (323) 203-0070

CULVER CITY

MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE
STE 465
CULVER CITY, CA 90230

MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE

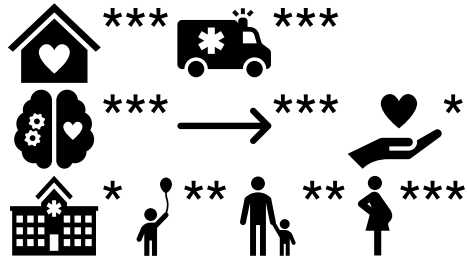
EL CAJON

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي
اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

EL SEGUNDO

24HR HOMECARE LLC

200 N PACIFIC COAST

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.
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blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

HWY STE 300
EL SEGUNDO, CA 90245

Phone: (310) 906-3683
After Hours Phone: (310)
906-3683

Accessibility: CONTACT
PROVIDER

Website: N/A

Community Supports Services:
Personal Care and
Homemaker Services, Respite
Services

Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (310)
906-3683

ENCINITAS

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL
STE B149

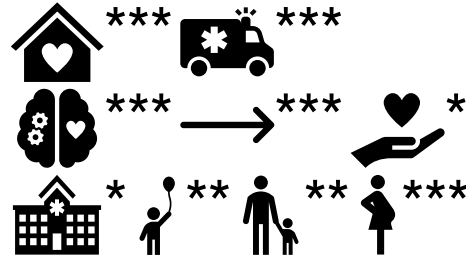
ENCINITAS, CA 92024

Phone: (619) 273-3295
After Hours Phone: (619)
273-3295

Accessibility: CONTACT
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
referrals@sdsdwelnesscollaborative.org
Phone for New Referrals and
Existing Patients: (619)
273-3295

Mailing Address: 1084 N EL
CAMINO REAL STE
B-149; Encinitas; CA; 92024

JI ECM Provider Billing- FFS
(PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services
and Participating in Warm
Handoffs; JI ECM Provider

Services-Warm Handoffs Only

ESCONDIDO

TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150

ESCONDIDO, CA 92025

Phone: (310) 280-5203
After Hours Phone: (310)
280-5203

Accessibility: CONTACT
PROVIDER

Website: N/A

Community Supports Services:
Housing Deposits, Housing
Agency and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (310)
280-5203

TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150

ESCONDIDO, CA 92025

Phone: (310) 280-5203
After Hours Phone: (310)

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرذ غير المحمي


اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين

إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

280-5203

 Accessibility: CONTACT PROVIDER

 Website: N/A

Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition


Navigation Services


Street Medicine Provider: N


Phone for New Referrals and
Existing Patients: (310)

280-5203

INTERFAITH COMMUNITY SERVICES

 550 W WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 489-6380

 After Hours Phone: (760)
489-6380

 Accessibility: CONTACT
PROVIDER


 Website: N/A


Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation


Services, Recuperative Care
(Medical Respite), Short-Term
Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (760)
489-6380

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA
91932

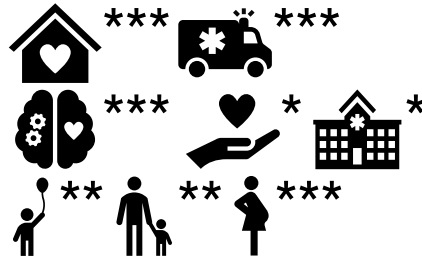
 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

tsadlowski@ibclinic.org


Phone for New Referrals and
Existing Patients: (619)

429-3733


LEMON GROVE

SERENE HEALTH

 7614 LEMON AVE STE C
LEMON GROVE, CA 91945

 Phone: (619) 354-1409

 After Hours Phone: (619)
354-1409

 Accessibility: CONTACT
PROVIDER

 Website: N/A

Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

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اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين

إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

andrea@serenehealth.com
Phone for New Referrals and
Existing Patients: (619)
354-1409

SERENE HEALTH

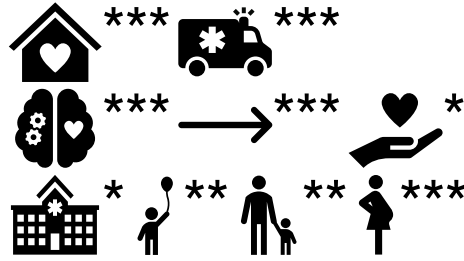
7614 LEMON AVE STE C
LEMON GROVE, CA 91945
Phone: (619) 354-1409
After Hours Phone: (619)
354-1409
Accessibility: CONTACT
PROVIDER
Website: N/A

Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
andrea@serenehealth.com
Phone for New Referrals and
Existing Patients: (619)
354-1409

LA MAESTRA COMMUNITY HEALTH

CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:

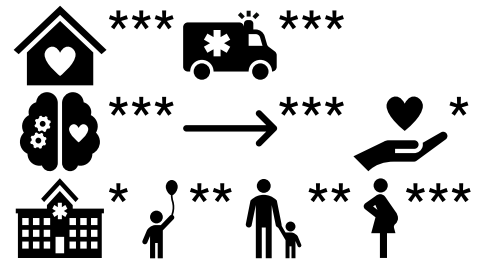


Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641
Mailing Address: 4060
FAIRMOUNT AVE; SAN

DIEGO; CA; 92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



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blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Community Supports Services: N/A

Street Medicine Provider: N
Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG

Phone for New Referrals and Existing Patients: (619)

510-4641

Mailing Address: 4060

FAIRMOUNT AVE;SAN

DIEGO;CA;92105

JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider

Billing- FFS (PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services and Participating in Warm Handoffs

LOS ANGELES

EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044

Phone: (323) 789-6492

After Hours Phone: (323)

789-6492

Accessibility: CONTACT PROVIDER

Website: N/A

Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services

Street Medicine Provider: N

Phone for New Referrals and Existing Patients: (323)

789-6492

EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044

Phone: (323) 789-6492

After Hours Phone: (323) 789-6492

Accessibility: CONTACT PROVIDER

Website: N/A

Community Supports Services:

Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services

Street Medicine Provider: N

Phone for New Referrals and

Existing Patients: (323)

789-6492

EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033

Phone: (323) 276-6471

After Hours Phone: (323) 276-6471

Accessibility: CONTACT PROVIDER

Website: N/A

Community Supports Services:

Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services

Street Medicine Provider: N

Phone for New Referrals and Existing Patients: (323)

276-6471

EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033

Phone: (323) 276-6471

After Hours Phone: (323) 276-6471

Accessibility: CONTACT PROVIDER

*الكبار**الأطفال***الكبار والأطفال على حد سواء

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إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



 Website: N/A
Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (323)
276-6471

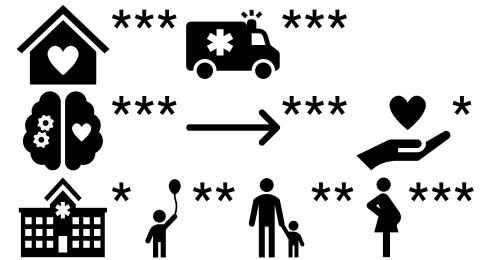


Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs






 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641
 Accessibility: CONTACT
PROVIDER
 Website: N/A
ECM Population of Focus:

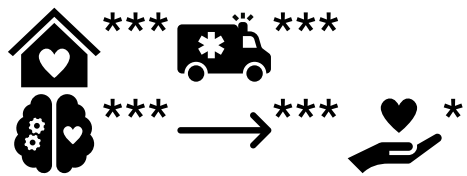


Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641
Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105

NATIONAL CITY

LA MAESTRA COMMUNITY HEALTH CENTERS

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641
 Accessibility: CONTACT
PROVIDER
 Website: N/A
ECM Population of Focus:



LA MAESTRA COMMUNITY HEALTH CENTERS

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة. طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

ORINDA

PATHWAY HOME SOLUTIONS INC

2 BIRCH CT
ORINDA, CA 94563
Phone: (209) 601-0734
After Hours Phone: (209) 601-0734
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Environmental Accessibility Adaptations (Home Modifications)
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (209) 601-0734

REDONDO BEACH

EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
Phone: (424) 282-2255
After Hours Phone: (424) 282-2255
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (424) 282-2255

EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
Phone: (424) 282-2255
After Hours Phone: (424) 282-2255

Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (424) 282-2255

SACRAMENTO

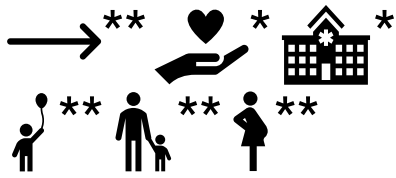
FULL CIRCLE HEALTH NETWORK

2201 K ST
SACRAMENTO, CA 95816
Phone: (888) 749-8877
After Hours Phone: (888) 749-8877
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



*الكبار **الأطفال ***الكبار والأطفال على حد سواء
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



Community Supports Services:
N/A

Street Medicine Provider: N

Email for New Referrals and
Existing Patients:

network@fullcirclehn.org

Phone for New Referrals and
Existing Patients: (888)

749-8877

Mailing Address: 2201 K

ST; SACRAMENTO; CA; 95816

JI ECM Provider Billing- FFS
(PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services
and Participating in Warm
Handoffs

SAN DIEGO

FATHER JOES VILLAGES

16 15TH ST
SAN DIEGO, CA 92101

Phone: (619) 645-6405
After Hours Phone: (619)
645-6405
Accessibility: CONTACT
PROVIDER
Website: N/A

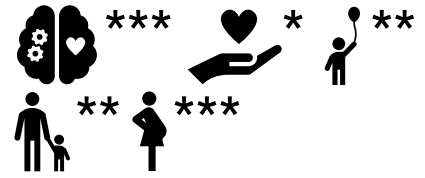
Community Supports Services:
Recuperative Care (Medical
Respite)

Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (619)
645-6405

HEALTHY CONNECT SAN DIEGO

1202 MORENA BLVD
SAN DIEGO, CA 92110
Phone: (619) 507-9333
After Hours Phone: (619)
507-9333
Hours: M-F 8AM-4PM
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

mhammel@comresearch.org
Phone for New Referrals and
Existing Patients: (619)

507-9333

HEALTHY CONNECT SAN DIEGO

1202 MORENA BLVD
SAN DIEGO, CA 92110
Phone: (619) 507-9333
After Hours Phone: (619)
507-9333
Hours: M-F 8AM-4PM
Accessibility: CONTACT
PROVIDER

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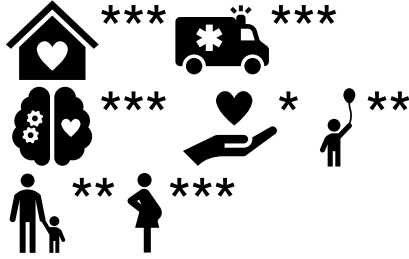
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Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services

Street Medicine Provider: N
Email for New Referrals and Existing Patients:

mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD

SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619)

429-3733

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N
Email for New Referrals and Existing Patients:

tsadlowski@ibclinic.org
Phone for New Referrals and Existing Patients: (619) 429-3733

HORIZON RECUPERATIVE CARE

3423 CHANNEL WAY

SAN DIEGO, CA 92110

Phone: (858) 326-1100

After Hours Phone: (858)

326-1100

Accessibility: CONTACT PROVIDER

Website: N/A

Community Supports Services:

Recuperative Care (Medical Respite), Short-Term

Post-Hospitalization Housing

Street Medicine Provider: N

Phone for New Referrals and Existing Patients: (858) 326-1100

HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108

Phone: (619) 507-9333

After Hours Phone: (619) 507-9333

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



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Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and Existing Patients:
mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N
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Accessibility: CONTACT PROVIDER
Website: N/A
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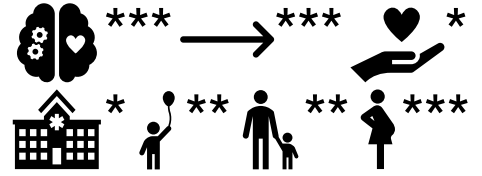


Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and Existing Patients:
mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
Asthma Remediation, Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm

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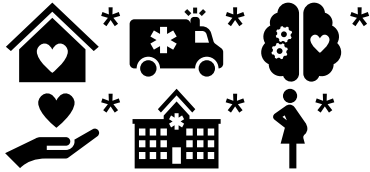
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Handoffs

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858) 637-3221
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Medically-Supportive
Food/Meals/Medically
Tailored Meals
Street Medicine Provider: N
Email for New Referrals and

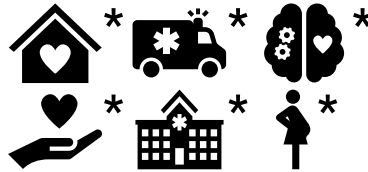
Existing Patients:

calaim@jfssd.org
Phone for New Referrals and
Existing Patients: (858)
637-3221

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858)
637-3221
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Medically-Supportive

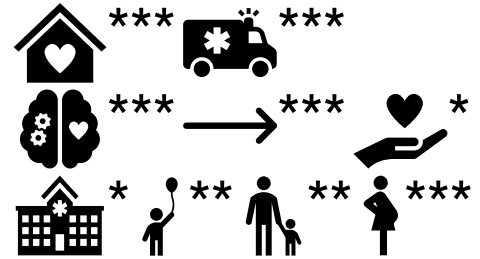
Food/Meals/Medically

Tailored Meals
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
calaim@jfssd.org
Phone for New Referrals and
Existing Patients: (858)
637-3221

FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER
WAY
SAN DIEGO, CA 92102
Phone: (619) 876-4450
After Hours Phone: (619)
876-4450
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة. طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Community Supports Services:

Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

CalAIMReferrals@fhcsd.org
Phone for New Referrals and
Existing Patients: (619)
876-4450

Mailing Address: 823
GATEWAY CENTER WAY; SAN
DIEGO; CA; 92102

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER

WAY

SAN DIEGO, CA 92102



Phone: (619) 876-4450



After Hours Phone: (619)
876-4450

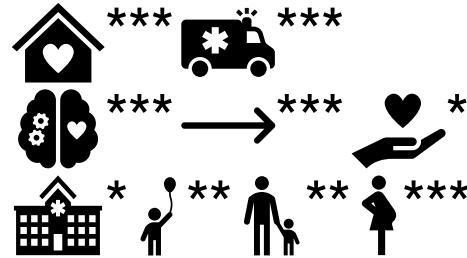


Accessibility: CONTACT
PROVIDER



Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

CalAIMReferrals@fhcsd.org
Phone for New Referrals and
Existing Patients: (619)
876-4450

Mailing Address: 823

GATEWAY CENTER WAY; SAN
DIEGO; CA; 92102

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider

Services-Pre-Release Services
and Participating in Warm
Handoffs

2-1-1 SAN DIEGO

3860 CALLE FORTUNADA
SAN DIEGO, CA 92123



Phone: (858) 380-5750



After Hours Phone: (858)
380-5750



Accessibility: CONTACT
PROVIDER



Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Tenancy and
Sustaining Services, Housing

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرذ غير المحمي

اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين






إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients:
ecm@211sandiego.org
Phone for New Referrals and Existing Patients: (858) 380-5750

2-1-1 SAN DIEGO






 3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
 *Phone: (858) 380-5750*
 *After Hours Phone: (858) 380-5750*
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
ECM Population of Focus:

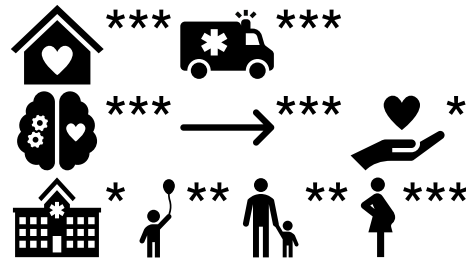


Community Supports Services:
Housing Tenancy and Sustaining Services, Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and

Existing Patients:
ecm@211sandiego.org
Phone for New Referrals and Existing Patients: (858) 380-5750

LA MAESTRA COMMUNITY HEALTH CENTERS


 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 510-4641*
 *After Hours Phone: (619) 510-4641*
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N

Email for New Referrals and Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105
Jl ECM Provider Billing- Direct Contract with Correctional Facilities; Jl ECM Provider Billing- FFS (PAVE Enrollment) Jl ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

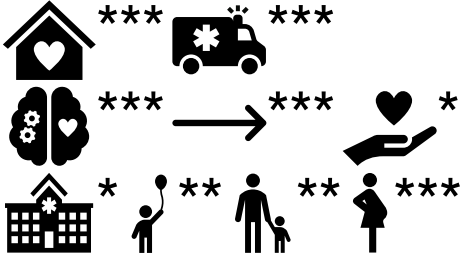
LA MAESTRA COMMUNITY HEALTH CENTERS

 4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 510-4641*
 *After Hours Phone: (619) 510-4641*
 *Accessibility: CONTACT PROVIDER*

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة. طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services

and Participating in Warm
Handoffs

MAMAS KITCHEN

3960 HOME AVE
SAN DIEGO, CA 92105
Phone: (619) 233-6262
After Hours Phone: (619)
233-6262

Accessibility: CONTACT
PROVIDER

Website: N/A

Community Supports Services:
Medically-Supportive
Food/Meals/Medically
Tailored Meals

Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (619)
233-6262

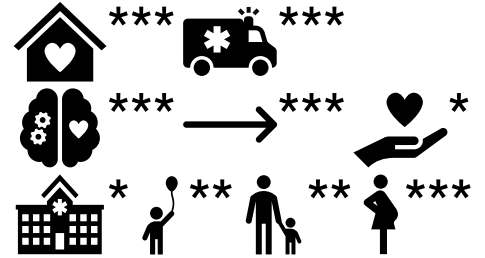
LA MAESTRA COMMUNITY HEALTH CENTERS

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641

Accessibility: CONTACT
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

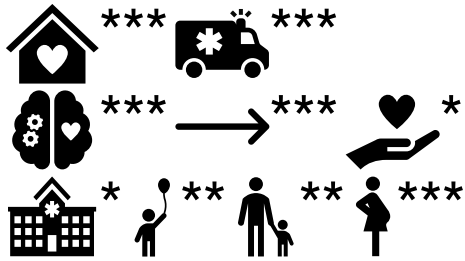
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة. طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

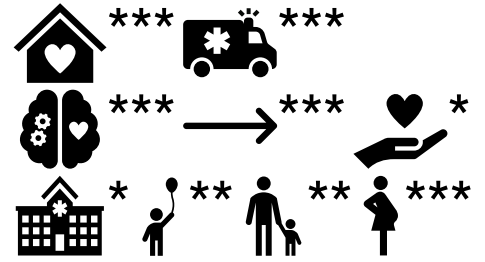
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
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510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
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Jl ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
Asthma Remediation, Housing
Deposits, Housing Tenancy and
Sustaining Services, Housing
Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
Jl ECM Provider Billing- Direct
Contract with Correctional
Facilities; Jl ECM Provider
Billing- FFS (PAVE Enrollment)
Jl ECM Provider

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

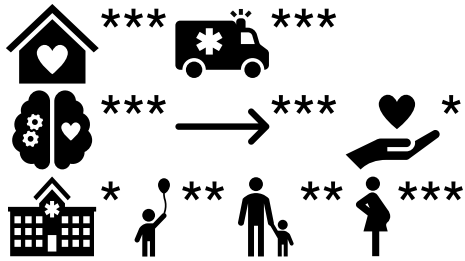
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:

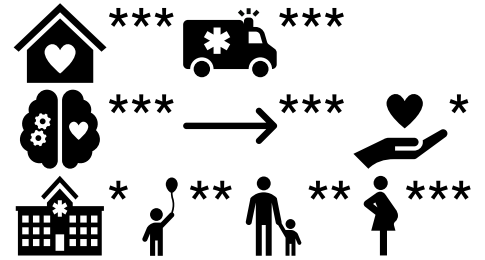


Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



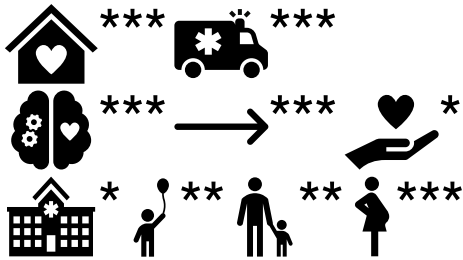
Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641
Mailing Address: 4060
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blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:

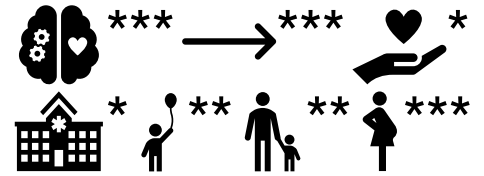


Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)

510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and
Existing Patients:
ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

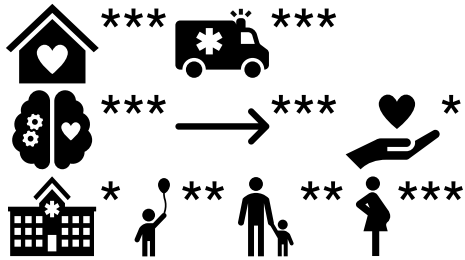
LA MAESTRA

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blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060

FAIRMOUNT AVE; SAN DIEGO; CA; 92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

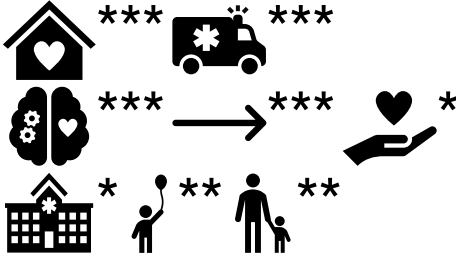
SERENE HEALTH

3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة. طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Phone: (619) 354-1409
After Hours Phone: (619) 354-1409
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A

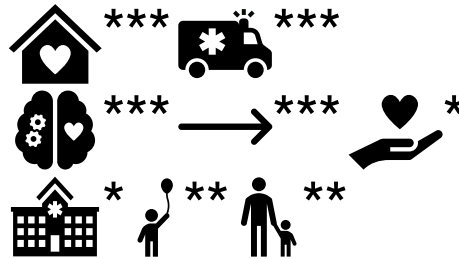
Street Medicine Provider: N
Email for New Referrals and Existing Patients:

andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619) 354-1409
Mailing Address: 4849
RONSON CT STE 207;SAN DIEGO;CA;92111
JI ECM Provider Billing- FFS (PAVE Enrollment)

JI ECM Provider
Services-Warm Handoffs Only

SERENE HEALTH

3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
Phone: (619) 354-1409
After Hours Phone: (619) 354-1409
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and Existing Patients:
andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619)

354-1409
Mailing Address: 4849
RONSON CT STE 207;SAN DIEGO;CA;92111
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Warm Handoffs Only

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
Accessibility: CONTACT PROVIDER
Website: N/A

Community Supports Services:
Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation
Services, Recuperative Care (Medical Respite), Short-Term Post-Hospitalization Housing
Street Medicine Provider: N

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي
اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Phone for New Referrals and Existing Patients: (619) 810-8668

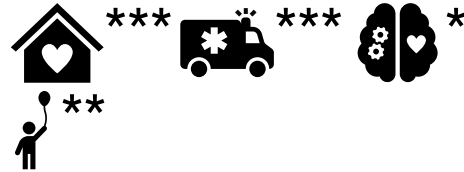
PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services, Recuperative Care (Medical Respite), Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 810-8668

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

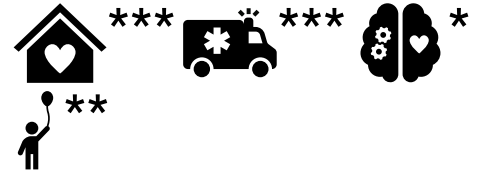
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (858) 279-0925

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (858) 810-8700

LIGHTBRIDGE HOSPICE LLC

6155 CORNERSTONE CT E STE 220
SAN DIEGO, CA 92121
Phone: (858) 458-2992
After Hours Phone: (858) 458-2992
Site Language(s) Spoken: Spanish, Tagalog
Hours: M-F 8AM-5PM
Accessibility: CONTACT PROVIDER
Website: www.LIGHTBRIDGEHOSPICE.com
ECM Population of Focus:

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة. طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

JILL@LIGHTBRIDGEHOSPICE.COM
Phone for New Referrals and
Existing Patients: (858)
458-2992

SAN FERNANDO

PARTNERS IN CARE FOUNDATION

732 MOTT ST STE 150
SAN FERNANDO, CA 91340

Phone: (747) 500-4609

After Hours Phone: (747)
500-4609

Accessibility: CONTACT
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Tenancy and

Sustaining Services, Housing
Transition Navigation

Services, Personal Care and
Homemaker Services, Respite
Services

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

ecm@picf.org
Phone for New Referrals and
Existing Patients: (747)
500-4609

PARTNERS IN CARE FOUNDATION

732 MOTT ST STE 150
SAN FERNANDO, CA 91340

Phone: (747) 500-4609

After Hours Phone: (747)
500-4609

Accessibility: CONTACT
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Tenancy and

Sustaining Services, Housing
Transition Navigation

Services, Personal Care and
Homemaker Services, Respite
Services

Street Medicine Provider: N
Email for New Referrals and
Existing Patients:

ecm@picf.org
Phone for New Referrals and
Existing Patients: (747)
500-4609

SAN MARCOS

MERAKEY ALLOS

334 VIA VERA CRUZ STE
204

SAN MARCOS, CA 92078

Phone: (916) 832-4868

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

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إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

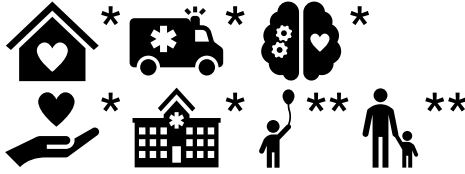
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

☎ After Hours Phone: (916) 832-4868

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

deborah.bowyer@merakey.org

Phone for New Referrals and Existing Patients: (916) 832-4868

AMERICARE ADULT DAY HEALTH CARE CENTER

License Number: 060000832

📍 340 RANCHEROS DR STE 196

SAN MARCOS, CA 92069

☎ Phone: (760) 682-2424

☎ After Hours Phone: (760) 682-2424

📄 Site English Spoken: Y

♿ Accessibility: CONTACT PROVIDER

🌐 Website: www.americareadhc.com

Cultural Competency: N

Accepting New Patients: No

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

inashtut@americareadhc.com

Phone for New Referrals and Existing Patients: (760) 682-2424

VAN NUYS

LIBERTANA HOME

HEALTH OF SHERMAN

OAKS

📍 5805 SEPULVEDA BLVD STE 605

VAN NUYS, CA 91411

☎ Phone: (818) 902-5000

☎ After Hours Phone: (818) 902-5000

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

Community Supports Services: Community Transition

Services/Nursing Facilities

Transition to a Home, Housing

Deposits, Housing Tenancy and

Sustaining Services, Housing

Transition Navigation

Services, Nursing Facility

Transition/Diversion to

Assisted Living

Facilities, Personal Care and

Homemaker Services, Respite

Services

Street Medicine Provider: N

Phone for New Referrals and

Existing Patients: (818)

902-5000

VISTA

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

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إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

VISTA COMMUNITY CLINIC

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

🕒 After Hours Phone: (760)
631-5000

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and
Existing Patients:

ecmteam@vcc.org

Phone for New Referrals and
Existing Patients: (760)

631-5000

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

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إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

ل. مرافق الرعاية العاجلة لدى Blue Shield Promise

CHULA VISTA

AFC URGENT CARE OF BONITA

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Spanish

SU 8AM-5PM
M-F 8AM-8PM
SA 8AM-8PM

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: No

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466

1740 ROSECRANS ST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. مرافق الرعاية العاجلة لدى Blue Shield Promise

SAN DIEGO, CA 92106
☎ (619) 790-7800
🕒 (619) 790-7800
🕒 SU-SA 8AM-8PM
♿ *Accessibility:* CONTACT PROVIDER
🌐 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1558788620
📍 1740 ROSECRANS ST
SAN DIEGO, CA 92106
☎ (619) 790-7800
🕒 (619) 790-7800
🕒 SU-SA 8AM-8PM
♿ *Accessibility:* CONTACT PROVIDER
🌐 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1558788620
📍 8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

☎ (858) 900-3550
🕒 (858) 900-3550
🕒 SU-SA 8AM-8PM
♿ *Accessibility:* CONTACT PROVIDER
🌐 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466
📍 8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126
☎ (858) 900-3550
🕒 (858) 900-3550
🕒 SU-SA 8AM-8PM
♿ *Accessibility:* CONTACT PROVIDER
🌐 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1558788620
📍 5671 BALBOA AVE
SAN DIEGO, CA 92111
☎ (858) 800-2880

🕒 (858) 800-2880
🕒 SU-SA 8AM-8PM
♿ *Accessibility:* CONTACT PROVIDER
🌐 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO




NPI: 1952995466
📍 5671 BALBOA AVE
SAN DIEGO, CA 92111
☎ (858) 800-2880
🕒 (858) 800-2880
🕒 SU-SA 8AM-8PM
♿ *Accessibility:* CONTACT PROVIDER
🌐 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466
📍 8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
☎ (619) 736-4600
🕒 (619) 736-4600


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






L. مرافق الرعاية العاجلة لدى Blue Shield Promise

 SU-SA 8AM-8PM
 *Accessibility:* CONTACT PROVIDER
 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1558788620

 8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108







 (619) 736-4600
 (619) 736-4600
 SU-SA 8AM-8PM
 *Accessibility:* CONTACT PROVIDER
 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

SANTEE

AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

 10538 MISSION GORGE RD
STE 100
SANTEE, CA 92071






 (619) 456-0033
 (619) 456-0033
 Arabic, Spanish
 SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
 *Accessibility:* CONTACT PROVIDER
 <https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

CHULA VISTA

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720
 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720
 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720
 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. مرافق الرعاية العاجلة لدى Blue Shield Promise

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Accessibility: CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Accessibility: CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Accessibility: CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN


NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Accessibility: CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Accessibility: CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910



(858) 966-1720

(858) 966-1720







SU 1PM-10PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



Blue Shield Promise لى مرافق الرعاية العاجلة لى .L





M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN


NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720

 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN







NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN

NPI: 1669617197
 386 E H ST STE 202

CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

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ESCONDIDO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

FNDTN
NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
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 M-F 8AM-5PM
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5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

(619) 713-5375

(619) 713-5375

Accessibility: CONTACT
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Accepting New Patients: No

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Blue Shield Promise لى مرافق الرعاية العاجلة لى .L

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Blue Shield Promise مرافق الرعاية العاجلة لدى L.

CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No




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SPECIALISTS SAN DIEGO MED
FNDDN**
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OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDTN

NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
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 N/A
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDTN

NPI: 1669617197
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 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020


 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No





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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

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Blue Shield Promise لى مرافق الرعاية العاجلة لى .L

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NPI: 1669617197
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150
SAN DIEGO, CA 92105
 (619) 280-2905
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

L. مرافق الرعاية العاجلة لدى Blue Shield Promise


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Accepting New Patients: No

RCH MID CITY URGENT CARE

NPI: 1710065933

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150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

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Accepting New Patients: No

SOUTHBAY URGENT CARE INC

NPI: 1558746750

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

-  1628 PALM AVE
SAN DIEGO, CA 92154
 -  (619) 591-9999
 -  (619) 591-9999
 -  Spanish, Vietnamese
 -  SU 10AM-6PM
M-F 9AM-8PM
SA 10AM-6PM
 -  *Accessibility:* CONTACT PROVIDER
 -  <https://www.southbayurgentcare.com/>
- Accepting New Patients: No

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