



Medi-Cal

July 2025 | San Diego مقاطعة

blue 
california

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 بريـل 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 ជាភាសាបស្ចុជ្ជ សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរព្រីល សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរពុម្ពធំៗ 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. کمکه 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). ອັງກິດຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕເລິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mienh Tagline (Mien) LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx 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 hluc 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) | ਆਪਣੇ ਲੋਕਾਂ 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 serbisyonang 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.

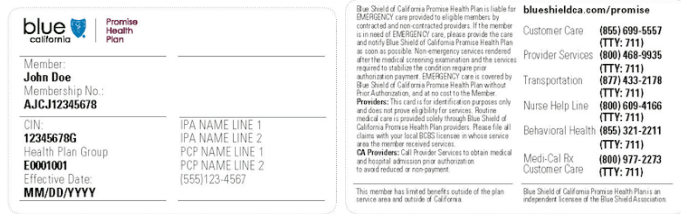
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A. المقدمة

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.

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.



بطاقة تعريف الدرع الأزرق (BIC) Blue Shield

الخدمات الصيدلانية من خلال Medi-Cal Rx

Department of Health Care Services (DHCS)، 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 1-800-977-2273.

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 على [711 TTY: 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.

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

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](https://www.blueshieldca.com/promise) أو الاتصال بخدمات أعضاء Blue Shield Promise على الرقم المجاني

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

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](https://www.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 (855) 699-5557 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

عندما تحصل على البطاقة التعريفية الخاصة بك، يرجى التأكد من صحة البيانات المدونة. وإن كانت خاطئة، اتصل بخدمة رعاية العملاء Blue Shield of California Promise Health Plan على رقم (855) 699-5557.

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 على المعلومات المهمة التي تحتاج إلى معرفتها عن كل مقدم خدمة.

دليل مقدمي الخدمات لدى Blue Shield Promise

San Diego - 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 الثقيف الصحي.
- ✓ الخدمات غير الطبية: خدمة العملاء وشكاوى الأعضاء والاجتماعات التوجيهية للأعضاء.
- ✓ مواد بتنسيقات أخرى، مثل برايل للمكفوفين أو الملفات الصوتية أو الملفات المطبوعة بحجم

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](https://www.blueshieldca.com/promise/medi-cal). المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

رعاية العملاء Blue Shield Promise، أو استخدم أداة البحث عن مقدم الرعاية المتوافرة على موقعنا الإلكتروني [.blueshieldca.com/promise](https://www.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 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.

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 جددًا 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 اتحاديًا (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 عامًا.

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 عامًا.

طبيب الرعاية الأولية (PCP): بصفتك عضوًا 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 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.

مؤشر إمكانية الوصول المادي لدليل مقدم 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.

EB (Exterior Building) = المبنى الخارجي

منحدرات الرصيف وغيرها من المنحدرات المؤدية إلى المبنى واسعة بما يكفي لممر كرسى 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.

P (Parking) = 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.

R (Restroom) = 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.

IB (Interior Building) = 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 متاحاً للعموم/ المرضى في جميع الأوقات التي يكون فيها المبنى مفتوحاً. 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.

T (Exam Table/Scale) = 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.

E (Exam Room) = 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.

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

كيفية قراءة قائمة مقدّم الخدمة

مثلاً:

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

1. التخصص الطبي لمقدّم الخدمة
2. اسم مقدّم الخدمة، نوع الرخصة
3. رقم البطاقة التعريفية لمقدّم الخدمة
4. جنس مقدّم الخدمة
5. رقم الرخصة الخاصة بمقدّم الخدمة
6. رقم NPI (معرف مقدم الرعاية الوطني) لمقدّم 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 مقدّم الخدمة
13. رقم هاتف مقدّم الخدمة
14. رقم فاكس مقدّم الخدمة
15. الموقع الإلكتروني الخاص بمقدّم الخدمة
16. عنوان البريد الإلكتروني لمقدّم الخدمة
17. Medi-Cal Open Panel:
18. حد السن الأدنى والأقصى:
19. إمكانية الوصول للأشخاص ذوي الإعاقة
20. ساعات عمل مقدّم الخدمة
21. قبول المرضى الجدد

1. طبيب أطفال
2. Doe, Jane, MD
3. الرقم التعريفي لمقدّم 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
21. نعم

اتصل برعاية عملاء Blue Shield Promise على الرقم 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.

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/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Certified Nurse Practitioner

GILBERT, TARI

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: NP10378

NPI#: 1811248347

4168 FRONT ST FL 3

San Diego, CA 92103

(858) 657-8000

Dermatology

ORTIZ, ARISA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A101163

NPI#: 1659556165

8899 UNIVERSITY CENTER LN STE 350

San Diego, CA 92122

(858) 657-8322

Endocrinology Metabolism Diabetes

MCCOWEN, KAREN

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: C127993

NPI#: 1972541274

4910 DIRECTORS PL

San Diego, CA 92121

(858) 249-5400

Endocrinology Metabolism Diabetes

MCCOWEN, KAREN

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: C127993

NPI#: 1972541274

200 W ARBOR DR

San Diego, CA 92103

(800) 926-8273

Endocrinology Metabolism Diabetes

MCCOWEN, KAREN

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: C127993

NPI#: 1972541274

9350 CAMPUS POINT DR

La Jolla, CA 92037

(858) 657-1636

**Endocrinology Metabolism Diabetes Internal
Medicine**

MIMOTO, MIZUHO

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A156492

NPI#: 1497019178

4168 FRONT ST

San Diego, CA 92103

(858) 657-1636

Family Practice

Celebi, Julie

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A128154

NPI#: 1194080911

330 LEWIS ST

San Diego, CA 92103

(800) 926-8273

Family Practice

FRASER, KEVIN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A191678

NPI#: 1528684131

6655 ALVARADO RD

San Diego, CA 92120

(800) 926-8273

Infectious Disease

Blumenthal, Jill

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A117338

NPI#: 1336308378

4168 FRONT ST FL 3

San Diego, CA 92103

(619) 543-3995

Infectious Disease

Blumenthal, Jill

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A117338

NPI#: 1336308378

4168 FRONT ST

San Diego, CA 92103

(619) 543-6146

Infectious Disease

WAGNER, GABRIEL

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A108967

NPI#: 1992962245

4168 FRONT ST

San Diego, CA 92103

(619) 543-3995

Infectious Disease Internal Medicine

SITAPATI, AMY

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A70282

NPI#: 1730261975

8899 UNIVERSITY CENTER LN

San Diego, CA 92122

(800) 926-8273

Infectious Disease Internal Medicine

SITAPATI, AMY

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A70282

NPI#: 1730261975

8899 UNIVERSITY CENTER LN STE 400

San Diego, CA 92122

(800) 926-8273

Internal Medicine

MENDEZ, ERIC

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A159874

NPI#: 1528599230

330 LEWIS ST

San Diego, CA 92103

(800) 926-8283

Internal Medicine

MILLEN, MARLENE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A82559

NPI#: 1225101355

8899 UNIVERSITY CENTER LN STE 400

San Diego, CA 92122

(800) 926-8273

Internal Medicine

MILLEN, MARLENE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A82559

NPI#: 1225101355

8899 UNIVERSITY CENTER LN

San Diego, CA 92122

(800) 926-8273

**Licensed Clinical Social Worker
GALLEGOS, GUADALUPE**

A Place of Growth

Licensed Clinical Social Worker

Female

License #: LCS116339

NPI#: 1073892956

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
CORTES, YESENIA**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC106084

NPI#: 1821355280

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
QUINTERO, GABRIELA**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC124310

NPI#: 1699159764

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
ROSAS, JESSICA**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC126541

NPI#: 1124533427

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
BELTRAN, RITA**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC141565

NPI#: 1033758909

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
LOPEZ, CARMINA**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC115636

NPI#: 1639564396

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
RAHLFS, KATELYN**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC121283

NPI#: 1578926192

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

**Marriage Family Therapist
Villasenor, Vanessa**

A Place of Growth

Marriage Family Therapist

Female

License #: MFC85865

NPI#: 1699020644

591 CAMINO DE LA REINA STE 802

San Diego, CA 92108

(858) 519-8002

Obstetrics / Gynecology

ALVARADO, JORGE

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A139473

NPI#: 1538588561

4168 FRONT ST

San Diego, CA 92103

(619) 543-7878

Obstetrics / Gynecology

ALVARADO, JORGE

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A139473

NPI#: 1538588561

8910 VILLA LA JOLLA DR STE 200

La Jolla, CA 92037

(858) 657-8745

Obstetrics / Gynecology

ALVARADO, JORGE

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A139473

NPI#: 1538588561

16950 VIA TAZON

San Diego, CA 92127

(800) 926-8273

Obstetrics / Gynecology

FRUGONI, GINA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A99646

NPI#: 1578729315

4168 FRONT ST

San Diego, CA 92103

(619) 543-7878

Obstetrics / Gynecology

FRUGONI, GINA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A99646

NPI#: 1578729315

9350 CAMPUS POINT DR

La Jolla, CA 92037

(800) 926-8273

Obstetrics / Gynecology

FRUGONI, GINA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A99646

NPI#: 1578729315

9350 CAMPUS POINT DR STE LLC

La Jolla, CA 92037

(858) 657-8745

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

3855 HEALTH SCIENCES DR

La Jolla, CA 92093

(800) 926-8273

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

9400 CAMPUS POINT DR

La Jolla, CA 92093

(858) 657-8200

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

9350 CAMPUS POINT DR

La Jolla, CA 92037

(800) 926-8273

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

9300 CAMPUS POINT DR

La Jolla, CA 92037

(800) 926-8273

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

16950 VIA TAZON

San Diego, CA 92127

(800) 926-8273

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

8899 UNIVERSITY CENTER LN

San Diego, CA 92122

(800) 926-8273

Otolaryngology

Vahabzadeh-Hagh, Andrew

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A128938

NPI#: 1346506920

200 W ARBOR DR

San Diego, CA 92103

(800) 926-8273

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

9400 CAMPUS POINT DR

La Jolla, CA 92093

(858) 657-8200

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

16950 VIA TAZON

San Diego, CA 92127

(800) 926-8273

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

9300 CAMPUS POINT DR

La Jolla, CA 92037

(800) 926-8273

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

8899 UNIVERSITY CENTER LN

San Diego, CA 92122

(800) 926-8273

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

9350 CAMPUS POINT DR

La Jolla, CA 92037

(800) 926-8273

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

200 W ARBOR DR

San Diego, CA 92103

(800) 926-8273

Otolaryngology

WEISSBROD, PHILIP

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A118221

NPI#: 1366590853

3855 HEALTH SCIENCES DR

La Jolla, CA 92093

(800) 926-8273

Pediatric Emergency Medicine Surgery Plastic

KANACK, MELISSA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A144388

NPI#: 1710373485

200 W ARBOR DR

San Diego, CA 92103

(800) 926-8273

Physicians Assistant

Nguyen, Khanh

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: PA22239

NPI#: 1427312644

200 W ARBOR DR

San Diego, CA 92103

(800) 926-8273

Psychiatry

Grelotti, David

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A133738

NPI#: 1619003035

200 W ARBOR DR

San Diego, CA 92103

(619) 543-6222

Psychiatry Psychiatry Child

Grelotti, David

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A133738

NPI#: 1619003035

4168 FRONT ST FL 3

San Diego, CA 92103

(619) 543-3995

Psychiatry Psychiatry Child

Grelotti, David

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A133738

NPI#: 1619003035

200 W ARBOR DR

San Diego, CA 92103

(619) 543-3995

Psychiatry Psychiatry Child

Grelotti, David

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A133738

NPI#: 1619003035

4168 FRONT ST

San Diego, CA 92103

(619) 543-3995

Speech Pathologist

Dockter, Andi

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: SP26061

NPI#: 1073150801

8899 UNIVERSITY CENTER LN

San Diego, CA 92122

(800) 926-8273

Surgery General

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

200 W ARBOR DR

San Diego, CA 92103

(619) 543-6222

Surgery General Surgery General Surgery

Plastic Surgery Plastic

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

9300 CAMPUS POINT DR

La Jolla, CA 92037

(619) 294-3746

Surgery General Surgery Plastic

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

4510 EXECUTIVE DR

San Diego, CA 92121

(619) 294-3746

Surgery General Surgery Plastic

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

200 W ARBOR DR

San Diego, CA 92103

(858) 657-7105

Surgery General Surgery Plastic

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

4520 EXECUTIVE DR

San Diego, CA 92121

(800) 926-8273

Surgery General Surgery Plastic

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

1200 GARDEN VIEW RD STE 200

Encinitas, CA 92024

(760) 944-0223

Surgery General Surgery Plastic

WALLACE, ANNE

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: G73000

NPI#: 1699732941

9350 CAMPUS POINT DR

La Jolla, CA 92037

(619) 543-6886

Surgery Plastic

GOSMAN, AMANDA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A96153

NPI#: 1164436291

1200 GARDEN VIEW RD

Encinitas, CA 92024

(800) 926-8273

Surgery Plastic

GOSMAN, AMANDA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A96153

NPI#: 1164436291

200 W ARBOR DR

San Diego, CA 92103

(858) 657-7105

Surgery Plastic

GOSMAN, AMANDA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A96153

NPI#: 1164436291

4510 EXECUTIVE DR

San Diego, CA 92121

(619) 294-3746

Surgery Plastic

GOSMAN, AMANDA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A96153

NPI#: 1164436291

9300 CAMPUS POINT DR

La Jolla, CA 92037

(858) 657-7000

Surgery Plastic

GOSMAN, AMANDA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A96153

NPI#: 1164436291

4520 EXECUTIVE DR

San Diego, CA 92121

(800) 926-8273

Surgery Plastic

GOSMAN, AMANDA

UCSD MEDICAL GROUP

Physician Group Practice

Female

License #: A96153

NPI#: 1164436291

4520 EXECUTIVE DR STE 1

San Diego, CA 92121

(800) 926-8273

Surgery Plastic

SULIMAN, AHMED

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A88033

NPI#: 1013169085

4520 EXECUTIVE DR

San Diego, CA 92121

(800) 926-8273

Surgery Plastic

SULIMAN, AHMED

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A88033

NPI#: 1013169085

1200 GARDEN VIEW RD

Encinitas, CA 92024

(800) 926-8273

Surgery Plastic

SULIMAN, AHMED

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A88033

NPI#: 1013169085

4510 EXECUTIVE DR

San Diego, CA 92121

(619) 294-3746

Urology

HSIEH, TUNG CHIN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A120604

NPI#: 1073758652

9850 GENESEE AVE STE 800

La Jolla, CA 92037

(800) 926-8273

Urology

HSIEH, TUNG CHIN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A120604

NPI#: 1073758652

9333 GENESEE AVE STE 320

San Diego, CA 92121

(858) 657-7876

Urology

HSIEH, TUNG CHIN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A120604

NPI#: 1073758652

9400 CAMPUS POINT DR

La Jolla, CA 92093

(858) 657-8200

Urology

HSIEH, TUNG CHIN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A120604

NPI#: 1073758652

11515 EL CAMINO REAL STE 110

San Diego, CA 92130

(800) 926-8273

Urology

HSIEH, TUNG CHIN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A120604

NPI#: 1073758652

200 W ARBOR DR

San Diego, CA 92103

(800) 926-8273

Urology

PATEL, DARSHAN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A171285

NPI#: 1417342924

16950 VIA TAZON

San Diego, CA 92127

(800) 926-8273

Urology

PATEL, DARSHAN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A171285

NPI#: 1417342924

9333 GENESEE AVE

San Diego, CA 92121

(800) 926-8273

Urology

PATEL, DARSHAN

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A171285

NPI#: 1417342924

9333 GENESEE AVE STE 320

San Diego, CA 92121

(800) 926-8273

Urology

WOO, JASON

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A114634

NPI#: 1437380086

200 W ARBOR DR

San Diego, CA 92103

(619) 543-3572

Urology

WOO, JASON

UCSD MEDICAL GROUP

Physician Group Practice

Male

License #: A114634

NPI#: 1437380086

1671 W MAIN ST STE B

El Centro, CA 92243

(855) 543-0555

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 320-3347

After Hours Phone: (619)
662-4100

License Number: 090000681

NPI: 1770124315

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Norwegian,
Spanish, Swedish

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.mtnhealth.org

BORREGO SPRINGS

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR

Provider ID: 703466

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004



Phone: (760) 767-5051

Fax: (760) 767-4552



After Hours Phone: (760)
767-5051

License Number: 080000651

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DAP
HEALTH INC



Website: N/A

CAMPO

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 478-9164



After Hours Phone: (619)
662-4100

License Number: 090000660

NPI: 1174164719

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Y



Site Languages(s) Spoken:
Spanish

Cultural Competency: N



Hours: M-F 8AM-5PM

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP



Website: www.syhealth.org

CARLSBAD

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008



Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

License Number: 080000240

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Y

Cultural Competency: N



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

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP



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.

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

License Number: 080000630

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

License Number: 550003541

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: N/A

CHULA VISTA

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS

Provider ID: 664445

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 426-2170

After Hours Phone: (619)
662-4100

License Number: 550002394

NPI: 1184135873

Accepting New Patients: Yes

Min/Max Age: 0\21

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.syhealth.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619)
515-2500

License Number: 550002061

NPI: 1346480837

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-F 8AM-5PM

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

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619)
662-4100

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B. العيادات الصحية المؤهلة فيدراليًا

License Number: 550002394
NPI: 1326486861

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

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N
 Hours: M-F 8AM-5PM
SA 8AM-4PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: www.syhealth.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

Fax: (619) 420-0660

 After Hours Phone: (619) 515-2325

License Number: 550002305
NPI: 1083959464

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

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F 8AM-5PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

EL CAJON

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

Fax: (619) 593-7164

 After Hours Phone: (619) 515-2499

License Number: 090000631
NPI: 1104861681

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

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619) 795-5991

License Number: 550003567
NPI: 1134590086

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

 Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

 Website: www.lamaestra.org

LA MAESTRA CHC-REA AVE

Provider ID: 664824

 181 REA AVE
EL CAJON, CA 92020

 Phone: (619) 312-0347

Fax: (619) 510-4649

 After Hours Phone: (619) 312-0347

License Number: 090000378
NPI: 1609849074

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

 Site English Spoken: Y
Cultural Competency: N

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

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

N

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

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020
 **Phone:** (619) 662-4100
Fax: (619) 785-3356
 **After Hours Phone:** (619) 662-4100
License Number: 550002514
NPI: 1568845741

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

 **Site English Spoken:** Y
 **Site Languages(s) Spoken:** Spanish, Arabic, Farsi, Russian, Latin

Cultural Competency: N
 **Hours:** M-F 8AM-5PM
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 **Website:** www.syhealth.org

DAP HEALTH-CENTRO MEDICO EL CAJON

Provider ID: 703462

 133 W MAIN ST
EL CAJON, CA 92020
 **Phone:** (619) 873-8940
Fax: (619) 401-0522
 **After Hours Phone:** (619) 873-8940
License Number: 550000430
NPI: 1154480069

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

 **Site English Spoken:** Y
Cultural Competency: N
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: DAP HEALTH INC
 **Website:** N/A

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020
 **Phone:** (619) 515-2498
Fax: (619) 269-0191
 **After Hours Phone:** (619) 515-2498
License Number: 550003553
NPI: 1932561198

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

 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL): N

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

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019
 **Phone:** (619) 312-0347
Fax: (619) 749-5480
 **After Hours Phone:** (619) 312-0347
NPI: 1336353721

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

 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8:30AM-5PM
American Sign Language (ASL): N

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

ESCONDIDO

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

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B. العيادات الصحية المؤهلة فيدرالياً

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
Fax: (360) 466-2745
 After Hours Phone: (760)
520-8100
License Number: 080000397
NPI: 1598703647

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900

License Number: 550000511
NPI: 1437335353

Accepting New Patients: Yes
Min/Max Age: 0\21

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: N/A

NEIGHBORHOOD HEALTHCARE PIDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

License Number: 080000657
NPI: 1265618185

Accepting New Patients: Yes
Min/Max Age: 0\21

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900
Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

License Number: 080000158
NPI: 1720264641

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: N/A

DAP HEALTH-CENTRO MEDICO ESCONDIDO

Provider ID: 703482

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 871-0606
Fax: (858) 634-6918

 After Hours Phone: (760)
871-0606

License Number: 550001260
NPI: 1023349883

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

 Site English Spoken: Y
Cultural Competency: N

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B. العيادات الصحية المؤهلة فيدرالياً

American Sign Language (ASL): **ESCONDIDO FAMILY HEALTH CENTER**

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: DAP HEALTH INC
 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
Fax: (760) 745-7847
 After Hours Phone: (619) 662-4100
License Number: 550008430
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Farsi, Spanish, Tagalog
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: N/A

Provider ID: 652372
 128 N BROADWAY
ESCONDIDO, CA 92025
 Phone: (619) 515-2474
 After Hours Phone: (619) 515-2474
License Number: 550002865
NPI: 1417640491
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: N/A

FALLBROOK

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
License Number: 080000002
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
License Number: 080000745
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

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B. العيادات الصحية المؤهلة فيدراليًا

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760)
723-6200

License Number: 550003781

NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760)
723-6200

License Number: 550004110

NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M 8:30AM-4PM

TU 8:30AM-12:30PM

W-TH 8:30AM-4PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760)
723-6200

License Number: 080000002

NPI: 1851300123

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760)
723-6200

License Number: 080000745

NPI: 1851300123

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760)
723-6200

License Number: 550003781

NPI: 1851300123

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

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B. العيادات الصحية المؤهلة فيدراليًا

 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
License Number: 550004110
NPI: 1851300123
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
License Number: 080000002
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
License Number: 080000745
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
License Number: 550003781
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 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 TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200

License Number: 550004110

NPI: 1649662719

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 451-4700

After Hours Phone: (760) 451-4720

License Number: 080000150

NPI: 1982756086

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

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

Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: N/A

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619) 429-3733

License Number: 090000119

NPI: 1790718351

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

Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.ihpsocal.org

JULIAN

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE

Provider ID: 664467

2721 WASHINGTON ST
JULIAN, CA 92036

Phone: (619) 662-4100

Fax: (760) 765-1278

After Hours Phone: (619) 662-4100

License Number: 550002514

NPI: 1235804139

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

Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Japanese

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.syhealth.org

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE

Provider ID: 664467

2721 WASHINGTON ST
JULIAN, CA 92036

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

Fax: (760) 765-1278

☎ After Hours Phone: (619) 662-4100

License Number: 550002514

NPI: 1235804139

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Japanese

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

🌐 Website: www.syhealth.org

LAKESIDE

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (858) 218-3000

Fax: (360) 462-2744

☎ After Hours Phone: (858) 218-3000

License Number: 080000483

NPI: 1932384120

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

🌐 Website: www.ihpsocal.org

LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA 91945

☎ Phone: (619) 515-2550

Fax: (619) 825-9577

☎ After Hours Phone: (619) 515-2550

License Number: 550001268

NPI: 1427282466

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F 9AM-5PM

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

☎ Phone: (619) 515-2399

Fax: (619) 269-0053

☎ After Hours Phone: (619) 515-2399

License Number: 550000465

NPI: 1417409228

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

📍 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2811

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B. العيادات الصحية المؤهلة فيدرالياً

☎ After Hours Phone: (619) 662-4100

License Number: 550001126

NPI: 1598907487

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL -PHP

🌐 Website: www.syhealth.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

📍 330 E 8TH ST
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 434-3514

☎ After Hours Phone: (619) 662-4100

License Number: 550003806

NPI: 1851757215

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL -PHP

🌐 Website: www.syhealth.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

Fax: (619) 434-7310

☎ After Hours Phone: (619) 434-7308

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: TH 8AM-2PM
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

📍 2101 GRANGER AVE
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 434-8999

☎ After Hours Phone: (844) 200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F 8AM-5PM
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: www.operationsamahan.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 474-3722

☎ After Hours Phone: (619) 662-4100

License Number: 090000136

NPI: 1003869363

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

American Sign Language (ASL): N

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B. العيادات الصحية المؤهلة فيدرالياً

 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 **Website:** www.syhealth.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 **Phone:** (844) 200-2426
Fax: (619) 474-3919
 **After Hours Phone:** (844) 200-2426
License Number: 090000183
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken:** Y
 **Site Languages(s) Spoken:** Tagalog, Lao, Spanish
Cultural Competency: N
 **Hours:** M-TH 8AM-6PM
F 8AM-5PM
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
 **Website:** www.operationsamahan.org

OCEANSIDE

TRUECARE

Provider ID: 480247
 2210 MESA DR STE 300

OCEANSIDE, CA 92054
 **Phone:** (760) 736-6767
Fax: (760) 736-6744
 **After Hours Phone:** (760) 736-6767
License Number: 080000531
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8AM-5PM
SA 8AM-4:30PM
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 **Website:** N/A

TRUECARE

Provider ID: 480247
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 **Phone:** (760) 736-6767
Fax: (760) 736-6744
 **After Hours Phone:** (760) 736-6767
License Number: 080000637
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8AM-5PM
SA 8AM-4:30PM
American Sign Language (ASL):

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 **Website:** N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA 92054
 **Phone:** (760) 631-5000
Fax: (760) 414-3892
 **After Hours Phone:** (760) 631-5000
License Number: 080000745
NPI: 1609094036
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8AM-5PM
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 **Website:** www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA 92054
 **Phone:** (760) 631-5000

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B. العيادات الصحية المؤهلة فيدرالياً

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

License Number: 080000745

NPI: 1609094036

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

PIER VIEW WAY

Provider ID: 402434

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-TU 8AM-5PM
W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

American Sign Language (ASL): **VISTA COMMUNITY CLINIC**

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

PIER VIEW WAY

Provider ID: 402434

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-TU 8AM-5PM

W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

🌐 Website: www.vistacommunityclinic.org

Provider ID: 206341

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

License Number: 080000002

NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-W 8AM-5PM

TH 8AM-12PM

F 8AM-5PM

SA 9AM-4PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

License Number: 080000745

NPI: 1649662719

Accepting New Patients: Yes

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B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 550003781
NPI: 1649662719

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 550004110
NPI: 1649662719

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000002
NPI: 1851300123

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000745
NPI: 1851300123

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM

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B. العيادات الصحية المؤهلة فيدراليًا

SA 9AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 550003781
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 550004110
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 080000002
NPI: 1316501562
Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 080000745
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
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 CAL-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 550003781

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 550004110

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.vistacommunityclinic.org

POWAY

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

License Number: 550004321

NPI: 1023518768

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F 8AM-5PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: N/A

RAMONA

TRUECARE

Provider ID: 449438

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

License Number: 080000149

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.ihpsocal.org

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SAN DIEGO

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550002478

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 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
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550003857

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 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
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550003857

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 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
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550002478

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM

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B. العيادات الصحية المؤهلة فيدراليًا

TH-F 8:30AM-5:30PM
American Sign Language (ASL): **LINDA VISTA HEALTH CARE**

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
 Website: www.operationsamahan.org

LINDA VISTA HEALTH CARE
CTR

Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
License Number: 080000069
NPI: 1609905215
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: N
 Hours: M-F 8:30AM-5:30PM

American Sign Language (ASL): **SAN DIEGO FAMILY CARE**

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.sdfamilycare.org

CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
License Number: 080000069
NPI: 1780665877
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: N
 Hours: M-F 8:30AM-5:30PM

American Sign Language (ASL): **N**

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.sdfamilycare.org

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700

License Number: 550003427
NPI: 1457724858

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: N
 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

American Sign Language (ASL): **N**

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.sdfamilycare.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 Phone: (844) 200-2426
Fax: (858) 536-8034
 After Hours Phone: (844) 200-2426

License Number: 080000146
NPI: 1861933897

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

 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

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N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN  Website: www.operationsamahan.org	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492  1016 OUTER RD SAN DIEGO, CA 92154  Phone: (619) 429-3733 Fax: (619) 628-5550  After Hours Phone: (619) 429-3733 License Number: 550001474	NPI: 1124782685 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Y  Site Languages(s) Spoken: Spanish Cultural Competency: N  Hours: M-F 8AM-5PM American Sign Language (ASL): N
OPERATION SAMAHAN - MIRA MESA Provider ID: 417101  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126  Phone: (844) 200-2426  After Hours Phone: (844) 200-2426 License Number: 080000146 NPI: 1871680397 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Y  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: N  Hours: M-F 8AM-5PM SA 8AM-2PM American Sign Language (ASL): N	Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Y  Site Languages(s) Spoken: Spanish Cultural Competency: N  Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CAL-PHP  Website: www.ibclinic.org	 Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CAL-PHP  Website: www.syhealth.org
N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN  Website: www.operationsamahan.org	SAN YSIDRO HEALTH PRECISION PARK Provider ID: 631494  1666 PRECISION PARK LN SAN DIEGO, CA 92173  Phone: (619) 662-4100 Fax: (619) 600-4870  After Hours Phone: (619) 662-4100 License Number: 550007737	SAN YSIDRO HEALTH CHC - OCEAN VIEW Provider ID: 227409  3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113  Phone: (619) 662-4100 Fax: (619) 232-5922  After Hours Phone: (619) 662-4100 License Number: 090000143 NPI: 1326225632 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Y  Site Languages(s) Spoken: , Spanish Cultural Competency: N  Hours: M-F 8AM-5PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER

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Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

 Website: www.syhealth.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 624977

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355

Fax: (619) 232-7011

 After Hours Phone: (619)
515-2355

NPI: 1447281936

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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: 664747

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2406

 After Hours Phone: (619)
515-2406

License Number: 550003556

NPI: 1336525906

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

Fax: (619) 234-2447

 After Hours Phone: (619)
515-2300

NPI: 1447281936

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

Fax: (619) 501-0627

 After Hours Phone: (619)
515-2424

License Number: 090000469

NPI: 1184169963

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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

 Phone: (619) 515-2424

Fax: (619) 683-7586

 After Hours Phone: (619)
515-2424

License Number: 090000469

NPI: 1700821303

Accepting New Patients: Yes

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B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\18

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-TH 8AM-5PM
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

Fax: (619) 501-0627

 After Hours Phone: (619) 515-2424

License Number: 090000469

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
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

 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619) 234-2158

License Number: 090000168

NPI: 1003902917

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
 Site Languages(s) Spoken: Korean, Spanish, Hindi

Cultural Competency: N

 Hours: M-F 8AM-5PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: WWW.SDAIHC.ORG

Indian Health Services: Y

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619) 515-2444

License Number: 080000115

NPI: 1386689701

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-W 8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619) 662-4100

License Number: 550003882

NPI: 1205477841

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese

Cultural Competency: N

 Hours: M-F 8AM-5PM

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B. العيادات الصحية المؤهلة فيدراليًا

American Sign Language (ASL): Fax: (858) 633-4681

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: N/A

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

Fax: (619) 255-8002

 After Hours Phone: (619) 515-2426

License Number: 550003108

NPI: 1477953933

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\22

 Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: www.sdfamilycare.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 795-9849

 After Hours Phone: (619) 255-9155

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F 8AM-5PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

 Website: www.lamaestra.org

LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT

Provider ID: 708497

 4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 312-0347

Fax: (619) 510-4649

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B. العيادات الصحية المؤهلة فيدراليًا

☎ After Hours Phone: (619) 312-0347

License Number: 090000378

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

🌐 Website: N/A

FAMILY HLTH CTR SD

HILLCREST

Provider ID: 417937

📍 4094 4TH AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

Fax: (619) 501-9645

☎ After Hours Phone: (619) 515-2545

License Number: 550003099

NPI: 1629456900

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-TH 8AM-9PM

F 8AM-5PM

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

☎ Phone: (619) 515-2454

Fax: (619) 794-2696

☎ After Hours Phone: (619) 515-2454

License Number: 550003556

NPI: 1336525906

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

🌐 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429

📍 1550 BROADWAY STE 2

SAN DIEGO, CA 92101

☎ Phone: (619) 515-2525

Fax: (619) 501-5814

☎ After Hours Phone: (619) 515-2525

License Number: 550002865

NPI: 1356750376

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

🌐 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

📍 1250 6TH AVE STE 100

SAN DIEGO, CA 92101

☎ Phone: (619) 515-2430

Fax: (619) 578-2410

☎ After Hours Phone: (619) 515-2430

License Number: 550002251

NPI: 1588901045

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F 8AM-5PM

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: FAMILY HEALTH CENTERS OF SAN DIEGO
 **Website:** www.fhcsd.org

FAMILY HEALTH CTR OF SD-ELM ST

Provider ID: 419167
 140 ELM ST
SAN DIEGO, CA 92101
 **Phone:** (619) 515-2520
Fax: (619) 231-0431
 **After Hours Phone:** (619) 515-2520
License Number: 550002061
NPI: 1316419070

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

 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8AM-5PM
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

 **Phone:** (619) 515-2560
Fax: (619) 263-2499
 **After Hours Phone:** (619) 515-2560
License Number: 550000465
NPI: 1982747671
Accepting New Patients: Yes
Min/Max Age: 0\None

 **Site English Spoken:** Y
Cultural Competency: N
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
 **Phone:** (619) 515-2422
Fax: (619) 269-0053
 **After Hours Phone:** (619) 515-2422
License Number: 550003113
NPI: 1235521782

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

 **Site English Spoken:** Y
Cultural Competency: N
 **Hours:** M-F 8AM-5PM
American Sign Language (ASL): N

N

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

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102
 **Phone:** (619) 515-2435
Fax: (619) 515-2435
 **After Hours Phone:** (619) 515-2435
License Number: 090000565
NPI: 1174549232

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

 **Site English Spoken:** Y
Cultural Competency: N
American Sign Language (ASL): N

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

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

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B. العيادات الصحية المؤهلة فيدرالياً

 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
License Number: 090000297
NPI: 1659415131
Accepting New Patients: No
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5:30PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: N/A

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: 090000660
NPI: 1538262092
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese
Cultural Competency: N
 Hours: M-F 8AM-5PM
SA 8AM-12PM

American Sign Language (ASL): Fax: (760) 736-6744

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: www.syhealth.org

SAN MARCOS

TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F 8AM-5PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Cultural Competency: N

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

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1811617939

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Cultural Competency: N

 Hours: M-F 8AM-5PM

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B. العيادات الصحية المؤهلة فيدراليًا

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

TRUECARE

Provider ID: 206426
150 VALPRED RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
SA 8AM-5PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
1595 GRAND AVE STE 106

SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL):
N
Accessibility: CONTACT

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
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
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619)
662-4100
License Number: 550002823
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: ,
Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP
Website: www.syhealth.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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

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B. العيادات الصحية المؤهلة فيدرالياً

 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: N
 Hours: M-F 8AM-8PM
SA 8AM-2PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.syhealth.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1967
 After Hours Phone: (619) 662-4100
License Number: 550004555
NPI: 1558852947
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish, Tagalog
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.syhealth.org

SANTEE

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE

Provider ID: 520609
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 Phone: (619) 662-4100
Fax: (619) 873-3476
 After Hours Phone: (619) 662-4100
License Number: 550003575
NPI: 1376184911
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Spanish
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.syhealth.org

SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
Fax: (619) 462-5584
 After Hours Phone: (619) 515-2555
License Number: 090000593
NPI: 1508801069
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

VALLEY CENTER

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 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.

B. العيادات الصحية المؤهلة فيدراليًا

742-9919
License Number: 080000483
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 After Hours Phone: (760) 742-9919
License Number: 080000397
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF

SOUTHERN CAL-PHP

 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 After Hours Phone: (760) 742-9919

License Number: 080000397

NPI: 1437335148

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

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F 8AM-5PM
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 After Hours Phone: (760) 742-9919
License Number: 080000483
NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F 8AM-5PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

 Website: N/A

VISTA

VCC DURIAN

Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083
 Phone: (844) 308-5003
Fax: (760) 414-3892
 After Hours Phone: (844) 308-5003
License Number: 080000328
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-TU 8:30AM-5PM
TH-F 8:30AM-5PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
 Website: www.vistacomm

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.

nityclinic.org

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

License Number: 1851300123

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-TU 8:30AM-5PM
TH-F 8:30AM-5PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License Number: 080000328

NPI: 1851300123

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ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

License Type: NP

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, 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

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

License Type: NP

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, 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

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

License Type: NP

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

SANDERS, JESSICA

License Type: NP

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

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C. دليل الرعاية الأولية

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP

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

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP

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

License Type: DC

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

ABDULRAHIM, AHMED

License Type: DC

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

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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: DC

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.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

CHIROPRACTOR

KELCHNER, MATTHEW

License Type: DC

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.or
g

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

License Type: MD

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.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

License Type: MD

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

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 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

DUBE, BIANCA

License Type: MD

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
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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

License Type: MD

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

KAUFHOLD, ANNE

License Type: MD

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

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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

VAN HOLLEBEKE, RACHEL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
 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

VAN HOLLEBEKE, RACHEL

License Type: MD
 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

License Type: DO
 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

g
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

WYLIE, BLAKE

License Type: DO
 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

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SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

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

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

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

License Type: MD

Provider Gender: Male

License Number: A158569

NPI: 1659638062

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Danish, French,
Norwegian, Swedish

Cultural Competency: N

Board Certified Specialty: No
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

PEDIATRICS

STENSMAN, LARS

License Type: MD

Provider Gender: Male

License Number: A158569

NPI: 1659638062

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Danish, French,
Norwegian, Swedish

Cultural Competency: N

Board Certified Specialty: No
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

License Type: PA

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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.mtnhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

License Type: PA
 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
 ♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

License Type: PA
 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

PHYSICIANS ASSISTANT

SHARPE, NORMA

License Type: PA
 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

BORREGO SPRINGS

DERMATOLOGY

ZELAC, DANIEL

License Type: MD
 Provider ID: 313070
 Provider Gender: Male
 License Number: G85319
 NPI: 1891709903
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL
 Board Certified Specialty: No
 DAP HEALTH INC
 📍 4343 YAQUI PASS RD
 BORREGO SPRINGS, CA 92004
 ☎ Phone: (760) 767-5051
 Fax: (760) 767-4552
 ☎ After Hours Phone: (760) 767-5051
 🌐 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.

C. دليل الرعاية الأولية

American Sign Language (ASL): **GHAFARI, DAUOD**

N

 Accessibility: CONTACT PROVIDER

DERMATOLOGY

ZELAC, DANIEL

License Type: MD

Provider ID: 313070

Provider Gender: Male

License Number: G85319

NPI: 1891709903

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
DAP HEALTH INC

 4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

 Phone: (760) 767-5051
Fax: (760) 767-4552

 After Hours Phone: (760) 767-5051

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

License Type: MD

Provider ID: 313070

Provider Gender: Male

License Number: A98486

NPI: 1053417691

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Board Certified Specialty: No
DAP HEALTH INC

 4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

 Phone: (760) 767-5051
Fax: (760) 767-4552

 After Hours Phone: (760) 767-5051

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GHAFARI, DAUOD

License Type: MD

Provider ID: 313070

Provider Gender: Male

License Number: A98486

NPI: 1053417691

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Board Certified Specialty: No
DAP HEALTH INC

 4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

 Phone: (760) 767-5051
Fax: (760) 767-4552

 After Hours Phone: (760) 767-5051

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FQHC

**DAP HEALTH-BORREGO
SPRINGS COMMUNITY**

HEALTH CTR,

Provider ID: 313070

NPI: 1134144165

 Provider English Spoken: Y
Cultural Competency: N

DAP HEALTH INC

 4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

 Phone: (760) 767-5051
Fax: (760) 767-4552

 After Hours Phone: (760) 767-5051

 Website: N/A

Medi-Cal Open Panel: Yes

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Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,

Provider ID: 313070

NPI: 1134144165

Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051
Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

GREENWAY, HUBERT

License Type: MD

Provider ID: 313070

Provider Gender: Male

License Number: C39104

NPI: 1366419004

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Board Certified Specialty: No
DAP HEALTH INC

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051
Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

GREENWAY, HUBERT

License Type: MD

Provider ID: 313070

Provider Gender: Male

License Number: C39104

NPI: 1366419004

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Board Certified Specialty: No
DAP HEALTH INC

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CAMPO

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL

License Type: NP

Provider ID: 275112

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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  <i>Accessibility: CONTACT PROVIDER</i>	<i>License Number: 20A14949</i> <i>NPI: 1174919971</i>	CAMPO, CA 91906  <i>Phone: (619) 662-4100</i> <i>Fax: (619) 824-9071</i>
<u>CERTIFIED NURSE PRACTITIONER</u>	 <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i>	 <i>After Hours Phone: (619) 662-4100</i>  <i>Website: N/A</i>
LIEBER, CAROL <i>License Type: NP</i> <i>Provider ID: 275112</i> <i>Provider Gender: Female</i> <i>License Number: NP20849</i> <i>NPI: 1487889846</i>  <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>IHP OF SOUTHERN CAL-PHP</i>  1388 BUCKMAN SPRINGS RD CAMPO, CA 91906  <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: www.syhealth.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>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i>  1388 BUCKMAN SPRINGS RD CAMPO, CA 91906  <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: www.syhealth.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>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: SU 10AM-4PM</i> <i>M-F 8:30AM-5:30PM</i> <i>SA 8AM-2:30PM</i>
<u>FAMILY PRACTICE</u>	<u>FAMILY PRACTICE</u>	<u>FAMILY PRACTICE</u>
BAUM, PETER <i>License Type: DO</i> <i>Provider ID: 275112</i> <i>Provider Gender: Male</i>	BAUM, PETER <i>License Type: DO</i> <i>Provider ID: 302751</i> <i>Provider Gender: Male</i> <i>NPI: 1174919971</i>  <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>RADY CHILDRENS HEALTH NETWORK</i>  1388 BUCKMAN SPRINGS RD	BAUM, PETER <i>License Type: DO</i> <i>Provider ID: 275112</i> <i>Provider Gender: Male</i> <i>License Number: 20A14949</i> <i>NPI: 1174919971</i>  <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>IHP OF SOUTHERN CAL-PHP</i>  1388 BUCKMAN SPRINGS RD CAMPO, CA 91906  <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: www.syhealth.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i>

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American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPOS, PRISCILLA

License Type: MD

Provider ID: 275112

Provider Gender: Female

License Number: A152651

NPI: 1508217399

 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

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

CAMPOS, PRISCILLA

License Type: MD

Provider ID: 275112

License Number: A152651

NPI: 1508217399

 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

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORONADO, MYRNA

License Type: MD

Provider ID: 275112

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

CORONADO, MYRNA

License Type: MD

Provider ID: 275112

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

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 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

License Type: MD

Provider ID: 275112

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

KAUFHOLD, ANNE

License Type: MD

Provider ID: 275112

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

License Type: MD

Provider ID: 275112

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

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

MCINTYRE, RYAN

License Type: MD

Provider ID: 275112

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

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

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

License Type: MD
 Provider ID: 275112
 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

ORTIZ, KENNETH

License Type: MD
 Provider ID: 275112
 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

License Type: DO
 Provider ID: 275112

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

License Type: DO
 Provider ID: 275112
 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

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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

License Type: DO
Provider ID: 302754
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

License Type: MD
Provider ID: 275112
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
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

SAIDRO, LUZVIMINDA

License Type: MD

Provider ID: 275112
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
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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: 275112
NPI: 1174164719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS

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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

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,

Provider ID: 275112
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

License Type: MD
Provider ID: 275112
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

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC

License Type: MD
Provider ID: 275112
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

License Type: PA
Provider ID: 275112
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

License Type: PA
 Provider ID: 275112
 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
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 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

License Type: NPF
 Provider ID: 289874
 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

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF
 Provider ID: 305300
 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

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF
 Provider ID: 289874
 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

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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 8AM-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF

Provider ID: 305300

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: 289874

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

FQHC

TRUECARE,

Provider ID: 289874

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

PEDIATRICS

BURGAMY, ELIZABETH

License Type: MD

Provider ID: 204602

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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\19

American Sign Language (ASL): License Type: MD

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

IYENGAR, RADHA

License Type: MD

Provider ID: 289874

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

IYENGAR, RADHA

Provider ID: 305300

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

IYENGAR, RADHA

License Type: MD

Provider ID: 289874

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

IYENGAR, RADHA

License Type: MD

Provider ID: 305300

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

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C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 204731
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\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

OCONNOR, ERICA

License Type: MD
Provider ID: 302621
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\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

TANAKA, MARY

License Type: MD
Provider ID: 241393
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
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

CHULA VISTA

CERTIFIED NURSE

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PRACTITIONER

FERNANDEZ LEYVA, JUAN CARLOS

License Type: NP

Provider ID: 39174

Provider Gender: Male

License Number: NP95001964

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

FERNANDEZ LEYVA, JUAN CARLOS

License Type: NP

Provider ID: 39174

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

 Provider English Spoken: Y

 Provider Language(s)
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Cultural Competency: N

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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

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

License Type: NP

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

License Type: NP

Provider ID: 217488

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

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CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

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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

LEONARD, BEVERLY

License Type: NP

Provider ID: 39174

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

LEONARD, BEVERLY

License Type: NP

Provider ID: 39174

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

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 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

License Type: NP

Provider ID: 39174

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

OWEN, MICHAEL

License Type: NP

Provider ID: 39174

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

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 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

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C. دليل الرعاية الأولية

 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
 License Type: RN
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN
 License Type: RN
 Provider ID: 217488
 Provider Gender: Female
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
 License Type: RN
 Provider ID: 217488
 Provider Gender: Female
 License Number: NP5579
 NPI: 1841200482
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 Cultural Competency: N
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 IHP OF SOUTHERN CAL-PHP

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 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
 License Type: RN
 Provider ID: 217488
 Provider Gender: Female
 License Number: RN371480
 NPI: 1841200482
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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 Min/Max Age: 0\None
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C. دليل الرعاية الأولية

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

License Type: NP

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

License Type: NP

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SAUNDERS, DENISE

License Type: NP

Provider ID: 39174

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

SAUNDERS, DENISE

License Type: NP

Provider ID: 39174

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):

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N  Accessibility: CONTACT PROVIDER	Provider Gender: Female License Number: NP95001705 NPI: 1912304569	SAN DIEGO  251 LANDIS AVE CHULA VISTA, CA 91910
CERTIFIED NURSE PRACTITIONER	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish	 Phone: (619) 515-2500  After Hours Phone: (619) 515-2500
VEGA, TERESA License Type: NP Provider ID: 39174 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	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	 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
 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	 Accessibility: CONTACT PROVIDER	CERTIFIED NURSE PRACTITIONER WILLIAMS, TAKISHA License Type: NP Provider ID: 39174 Provider Gender: Female License Number: NP95013978 NPI: 1881727386
CERTIFIED NURSE PRACTITIONER	CERTIFIED NURSE PRACTITIONER	CERTIFIED NURSE PRACTITIONER
VEGA, TERESA License Type: NP Provider ID: 39174	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF	 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

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C. دليل الرعاية الأولية

American Sign Language (ASL): Provider ID: 39174

N

 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA

License Type: CRNM

Provider ID: 39174

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

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA

License Type: CRNM

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

ABDULRAHIM, AHMED

License Type: DC

Provider ID: 39174

License Number: DC28335

NPI: 1619040292

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Burmese, Gujarati,
Hindi, Urdu

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 8AM-5PM

CHIROPRACTOR

ABDULRAHIM, AHMED

License Type: DC

Provider ID: 39174

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

FAMILY HEALTH CENTERS OF
SAN DIEGO

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CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
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 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.

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

CHIROPRACTOR

HASHEM, SHIVA

License Type: DC

Provider ID: 39174

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

HASHEM, SHIVA

License Type: DC

Provider ID: 39174

License Number: DC26269

NPI: 1952950776

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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 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

License Type: DC

Provider ID: 217488

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
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
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, HARON

License Type: DC

Provider ID: 217488

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
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
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	Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	 Accessibility: CONTACT PROVIDER
CHIROPRACTOR	CHIROPRACTOR	CHIROPRACTOR
PLANTE, CHARLES License Type: DC Provider ID: 217488 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	REYNOSO, ALFONSO License Type: DC Provider ID: 217488 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	CHIROPRACTOR	 678 3RD AVE CHULA VISTA, CA 91910  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
CHIROPRACTOR	CHIROPRACTOR	ENDOCRINOLOGY
PLANTE, CHARLES License Type: DC Provider ID: 217488 Provider Gender: Male License Number: DC31963 NPI: 1760464960  Provider English Spoken: Y	REYNOSO, ALFONSO License Type: DC Provider ID: 217488 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	METABOLISM DIABETES CARRILLO, MARITZA License Type: MD Provider ID: 217488 Provider Gender: Female License Number: A163183 NPI: 1649628587  Provider English Spoken: Y Cultural Competency: N

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C. دليل الرعاية الأولية

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
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

CARRILLO, MARITZA

License Type: MD
Provider ID: 217488
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

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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

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL

License Type: MD
Provider ID: 217488
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
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL

License Type: MD
Provider ID: 217488
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
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Website: www.syhealth.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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FAMILY PRACTICE

ALANIZ, MATEO

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

AMANAT, SOROOSH

License Type: MD

Provider ID: 217488

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

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

AMANAT, SOROOSH

License Type: MD

Provider ID: 217488

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

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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 8AM-2:30PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

License Type: MD
 Provider ID: 217488
 Provider Gender: Female
 License Number: A123604
 NPI: 1053532986

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No
 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
 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

ARCE GOMEZ, LAURA

License Type: MD
 Provider ID: 217488
 Provider Gender: Female
 License Number: A123604
 NPI: 1053532986

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No
 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
 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

License Type: MD

Provider ID: 217488

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A138474

NPI: 1427475318

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

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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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHERY, FARAH

License Type: MD
Provider ID: 73137
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
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH

License Type: MD
Provider ID: 39174
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

License Type: MD
Provider ID: 73137
Provider Gender: Female
License Number: A108681
NPI: 1114183688
Provider English Spoken: Y
Provider Language(s)
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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
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH

License Type: MD

Provider ID: 39174

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
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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

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORNEJO PINA, RAQUEL

License Type: MD

Provider ID: 39174

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

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Medi-Cal Open Panel: Yes

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FAMILY PRACTICE

CORNEJO PINA, RAQUEL

License Type: MD

Provider ID: 39174

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

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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

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

DY, DIANE

License Type: MD

Provider ID: 39174

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

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 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/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DY, DIANE

License Type: MD

Provider ID: 39174

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

GARCIA, KARLA

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A120672

NPI: 1154647410

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

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

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

GARCIA, KARLA

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A120672

NPI: 1154647410

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
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 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

HUBLEY, PAUL

License Type: MD

Provider ID: 39174

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

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 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

HUBLEY, PAUL

License Type: MD
Provider ID: 39174
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
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 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, KRYSTAL

License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A159831
NPI: 1922531250

 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

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

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

JIMENEZ, KRYSTAL

License Type: MD
Provider ID: 217488
Provider Gender: Female

License Number: A159831
NPI: 1922531250

 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

 678 3RD AVE
CHULA VISTA, CA 91910
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 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

JOHNSON, DANIEL

License Type: DO
Provider ID: 217488
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

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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
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

JOHNSON, DANIEL

License Type: DO
Provider ID: 217488
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
678 3RD AVE

CHULA VISTA, CA 91910

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

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

LARA, LESLEY

License Type: MD
Provider ID: 217488
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
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 425-6941
After Hours Phone: (619) 425-6941
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
SA 8AM-4PM

FAMILY PRACTICE

LARA, LESLEY

License Type: MD
Provider ID: 217488
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
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 425-6941
After Hours Phone: (619) 425-6941
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
SA 8AM-4PM

FAMILY PRACTICE

MCKENNETT, MARIANNE

License Type: MD
Provider ID: 217488
Provider Gender: Female

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C. دليل الرعاية الأولية

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MCKENNETT, MARIANNE

License Type: MD
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MENON, POOJA

License Type: MD
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MENON, POOJA

License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123263
NPI: 1053600064

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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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

MERRILL, SARAH

License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123492
NPI: 1225399512

 Provider English Spoken: Y

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C. دليل الرعاية الأولية

 **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
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

MERRILL, SARAH
License Type: MD
Provider ID: 217488
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
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

MOYA, MARY
License Type: MD
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 **Accessibility:** CONTACT
PROVIDER

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 217488
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
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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.

C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH

License Type: MD

Provider ID: 73137

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): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH

License Type: MD

Provider ID: 73137

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): N

 Accessibility: CONTACT

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C. دليل الرعاية الأولية

PROVIDER	License Number: A115699 NPI: 1770718975	CORONADO HOSP AND HEALTHCARE CTR
<u>FAMILY PRACTICE</u>	 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM	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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
PALOMINO, MARY License Type: MD Provider ID: 217488 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM	<u>FAMILY PRACTICE</u> PEDROTTY, JOHN License Type: MD Provider ID: 217488 Provider Gender: Male License Number: G80234 NPI: 1992861629  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP	<u>FAMILY PRACTICE</u> PEDROTTY, JOHN License Type: MD Provider ID: 217488 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

PEREZ, PERLITA

License Type: MD
Provider ID: 39174
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):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

License Type: MD
Provider ID: 39174
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):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PIEROS, JANELLE

License Type: DO
Provider ID: 217488
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
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

PIEROS, JANELLE

License Type: DO
Provider ID: 217488
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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

PISINGER, PATRICIA

License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): License Type: MD

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAHMAN, AKBAR

Provider ID: 217488

Provider Gender: Male

License Number: A110134

NPI: 1720314933

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAHMAN, AKBAR

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: A110134

NPI: 1720314933

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD LA

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C. دليل الرعاية الأولية

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE

License Type: DO
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE

License Type: DO
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SERPAS, SHAILA

License Type: MD
Provider ID: 217488
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)
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

SERPAS, SHAILA

License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G74728
NPI: 1124039136
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
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.

C. دليل الرعاية الأولية

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) 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

SWARTZ, JOHN

License Type: MD
Provider ID: 217488
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
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

SWARTZ, JOHN

License Type: MD
Provider ID: 217488
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
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

License Type: MD
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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FAMILY PRACTICE

TALavera, GREGORY

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

License Type: MD

Provider ID: 217488

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

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

FAMILY PRACTICE

TREJO, RAUL

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

WEN, AKI

License Type: DO

Provider ID: 217488

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

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.

C. دليل الرعاية الأولية

 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-5PM

FAMILY PRACTICE

WEN, AKI

License Type: DO
Provider ID: 217488
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
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

WHITLEY, NICHOLAS

License Type: MD
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

WHITLEY, NICHOLAS

License Type: MD
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

License Type: MD
Provider ID: 217488
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
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	 Provider English Spoken: Y Cultural Competency: N FAMILY HEALTH CENTERS OF SAN DIEGO	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM
FAMILY PRACTICE		
YOON, RYAN License Type: MD Provider ID: 217488 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	 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: 73137 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
	FQHC	
 678 3RD AVE CHULA VISTA, CA 91910  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	CHULA VISTA FAMILY HLTH CTR, Provider ID: 39174 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	 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		FQHC
CHULA VISTA FAMILY HLTH CTR, Provider ID: 39174 NPI: 1346480837		FAMILY HLTH CTR SAN DIEGO-RICE FAM HC, Provider ID: 73137 NPI: 1083959464  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.

C. دليل الرعاية الأولية

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: 217488
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
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 CHULA VISTA,

Provider ID: 217488
NPI: 1326486861
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
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Phone: (619) 662-4100
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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
SA 8AM-4PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 307636
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

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 307636
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

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

PHAM, QUYNH

License Type: DDS
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL DENTISTRY

PHAM, QUYNH

License Type: DDS
Provider ID: 217488
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
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

GENERAL PRACTICE

SAMI, REMAN

License Type: DO
Provider ID: 217488
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

SAMI, REMAN

License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA

License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A162816
NPI: 1932558301
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish

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Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A162816
NPI: 1932558301
 Provider English Spoken: Y
 Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

INFECTIOUS DISEASE

POLESKY, ANDREA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G81333
NPI: 1063517365
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tongan
Cultural Competency: N
Hospital Affiliation: SANTA CLARA VALLEY MED CTR
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 425-6941
 After Hours Phone: (619)

425-6941
 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
 SA 8AM-4PM

INFECTIOUS DISEASE

POLESKY, ANDREA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G81333
NPI: 1063517365
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tongan
Cultural Competency: N
Hospital Affiliation: SANTA CLARA VALLEY MED CTR
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 425-6941
 After Hours Phone: (619) 425-6941
 Website: www.syhealth.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
 SA 8AM-4PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

CHEN, TSUH-YIN

License Type: MD

Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

License Type: MD
 Provider ID: 217488
 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

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C. دليل الرعاية الأولية

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
 Provider ID: 39174
 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

BUECHNER, CHARLENE

License Type: MD
 Provider ID: 39174
 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

License Type: MD
 Provider ID: 39174
 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

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C. دليل الرعاية الأولية

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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD
Provider ID: 39174
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

License Type: MD
Provider ID: 39174
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

 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

CHAKRABARTI, PRIYA

License Type: MD
Provider ID: 39174
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

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 39174
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

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C. دليل الرعاية الأولية

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

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License Number: A108228
NPI: 1629277322
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Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 39174
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
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 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

License Type: MD
Provider ID: 39174
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

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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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD
Provider ID: 39174
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

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Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
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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

License Type: MD

Provider ID: 39174

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
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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

License Type: MD

Provider ID: 39174

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

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

LIPSCHITZ, LISA

License Type: MD

Provider ID: 39174

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Min/Max Age: 0\None

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 39174

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

 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

SAPRA, SONIA

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 39174
 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
 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

License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

License Type: MD
 Provider ID: 217488
 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

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 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

License Type: MD
Provider ID: 217488
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
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

License Type: DO
Provider ID: 39174
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

STABEN, REBECCA

License Type: DO
Provider ID: 39174
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
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 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

License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
 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: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNCOLOGY

TRUJILLO, JENNIFER

License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Board Certified Specialty: No

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNCOLOGY

ZIEG, ALAN

License Type: MD
Provider ID: 39174
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

OBSTETRICS / GYNCOLOGY

ZIEG, ALAN

License Type: MD
Provider ID: 39174
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)

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C. دليل الرعاية الأولية

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

PAPASTERGIOU, GEORGIOS
 License Type: MD
 Provider ID: 217488
 Provider Gender: Male
 License Number: A127706
 NPI: 1790054393
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Farsi,
 French, Italian, Modern
 Greek, 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
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
 License Type: MD
 Provider ID: 217488
 Provider Gender: Male
 License Number: A127706
 NPI: 1790054393
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Farsi,
 French, Italian, Modern
 Greek, 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

OPHTHALMOLOGY

SKAF, AYHAM
 License Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ATIENZA, PAMELA

License Type: MD
 Provider ID: 202519
 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
 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND

License Type: MD
 Provider ID: 265352
 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

License Type: MD
 Provider ID: 204506
 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

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C. دليل الرعاية الأولية

 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

License Type: MD

Provider ID: 204392

Provider Gender: Female

NPI: 1346211554

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Modern 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

License Type: MD

Provider ID: 204390

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,

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

License Type: MD

Provider ID: 217488

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

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.

C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DONG, TAMMY

License Type: MD

Provider ID: 217488

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DORINGO, ELAINIE

License Type: MD

Provider ID: 204936

Provider Gender: Female

NPI: 1013005636

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

FLETCHER, EMILY

License Type: MD

Provider ID: 204524

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

 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

FLORES, ERNEST

License Type: MD

Provider ID: 303789

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

FRESNO, BLANCA

License Type: MD

Provider ID: 204716

Provider Gender: Female

NPI: 1346258787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

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, RAFAEL

License Type: MD

Provider ID: 204939

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

 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

License Type: MD

Provider ID: 307636

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

GHAHREMANI, SIMIN

License Type: MD
Provider ID: 307636
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

GHAHREMANI, SIMIN

License Type: MD
Provider ID: 302740
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

HOLLICK, NATALIE

License Type: DO
Provider ID: 261027

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

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

ISAIAS, AGNELA

License Type: MD
Provider ID: 307636
Provider Gender: Female
License Number: A82912
NPI: 1790772572

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

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C. دليل الرعاية الأولية

Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR, UC
SAN DIEGO HEALTH - EAST
CAMPUS MEDICAL CENTER
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

ISAIAS, AGNELA

License Type: MD
Provider ID: 307636
Provider Gender: Female
License Number: A82912
NPI: 1790772572
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP CORONADO HOSP

AND HEALTHCARE CTR, UC
SAN DIEGO HEALTH - EAST
CAMPUS MEDICAL CENTER
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

License Type: DO
Provider ID: 261028
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\18
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

KORSAND, SID

License Type: MD
Provider ID: 307636
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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): Provider ID: 302755

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID

License Type: MD

Provider ID: 307636

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

License Type: MD

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

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

License Type: DO

Provider ID: 302425

Provider Gender: Female

NPI: 1487279246

 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-12PM

PEDIATRICS

MISTRY, CHETAN

License Type: MD

Provider ID: 204842

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, TRUC

License Type: MD

Provider ID: 204837

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

License Type: MD

Provider ID: 205035

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

ROWHANI, NAGHMEH

License Type: MD

Provider ID: 307636

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

ROWHANI, NAGHMEH

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
 Provider ID: 307636
 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

License Type: MD
 Provider ID: 39174
 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

SALAZAR, JUANITA

License Type: MD
 Provider ID: 39174
 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

License Type: MD
 Provider ID: 206254
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

License Type: MD

Provider ID: 217488

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

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHETH, HASMUKH

License Type: MD

Provider ID: 217488

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

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

VALENCIA, MARILES

License Type: MD

Provider ID: 204502

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PEDIATRICS

YAO, CATHERINE

License Type: MD
Provider ID: 204644
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

License Type: MD
Provider ID: 204417

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\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

License Type: PA
Provider ID: 73137
Provider Gender: Female
License Number: PA61683

NPI: 1215477765
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
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

License Type: PA
Provider ID: 39174
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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, 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

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

License Type: PA
 Provider ID: 73137
 Provider Gender: Female
 License Number: PA61683
 NPI: 1215477765

 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
 Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

License Type: PA
 Provider ID: 39174
 Provider Gender: Female
 License Number: PA61683
 NPI: 1215477765

 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 8AM-5PM

PHYSICIANS ASSISTANT

INDA, PRISCILLA

License Type: PA
 Provider ID: 217488
 Provider Gender: Female

License Number: PA54404
 NPI: 1679008379

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Russian,
 Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA

Board Certified Specialty: No
 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
 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

INDA, PRISCILLA

License Type: PA
 Provider ID: 217488
 Provider Gender: Female
 License Number: PA54404
 NPI: 1679008379

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Russian,
 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.

C. دليل الرعاية الأولية

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
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

MENDEZ, JESUS

License Type: PA
Provider ID: 217488
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MENDEZ, JESUS

License Type: PA
Provider ID: 217488
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

License Type: PA
Provider ID: 39174
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

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

PHYSICIANS ASSISTANT

QUICK, ELISABETH

License Type: PA
Provider ID: 39174
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
251 LANDIS AVE
CHULA VISTA, CA 91910

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 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

PHYSICIANS ASSISTANT

REVELES, DIANA
 License Type: PA
 Provider ID: 73137
 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

PHYSICIANS ASSISTANT

REVELES, DIANA
 License Type: PA
 Provider ID: 73137
 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
 License Type: DPM
 Provider ID: 217488
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE
 License Type: DPM
 Provider ID: 217488
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
 License Type: DPM
 Provider ID: 39174
 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

PODIATRIST

SCHNEIDER, SARAH
 License Type: DPM
 Provider ID: 39174
 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
 License Type: PT
 Provider ID: 39174
 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

AMAYA, RICARDO
 License Type: PT
 Provider ID: 39174
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	License Number: PT298792 NPI: 1548867419	CHULA VISTA, CA 91910  Phone: (619) 515-2500  After Hours Phone: (619) 515-2500
REGISTERED PHYSICAL THERAPIST	 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO	 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):
AVILES, LEAH License Type: PT Provider ID: 39174 Provider Gender: Female License Number: PT298792 NPI: 1548867419  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):	 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	N  Accessibility: CONTACT PROVIDER
REGISTERED PHYSICAL THERAPIST	REGISTERED PHYSICAL THERAPIST	REGISTERED PHYSICAL THERAPIST
CUMMINGS, GEORGE License Type: PT Provider ID: 39174 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):	CUMMINGS, GEORGE License Type: PT Provider ID: 39174 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):	CUMMINGS, GEORGE License Type: PT Provider ID: 39174 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):
REGISTERED PHYSICAL THERAPIST	REGISTERED PHYSICAL THERAPIST	REGISTERED PHYSICAL THERAPIST
AVILES, LEAH License Type: PT Provider ID: 39174 Provider Gender: Female	CUMMINGS, GEORGE License Type: PT Provider ID: 39174 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):	CUMMINGS, GEORGE License Type: PT Provider ID: 39174 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

License Type: PT

Provider ID: 39174

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

GONZALES, MICHELLE

License Type: PT

Provider ID: 39174

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

License Type: PT

Provider ID: 39174

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

MIGNEA, DAVID

License Type: PT

Provider ID: 39174

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

RODRIGUEZ, CASSANDRA

License Type: PT

Provider ID: 39174

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

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

RODRIGUEZ, CASSANDRA

License Type: PT

Provider ID: 39174

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

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

EL CAJON

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER

License Type: NP

Provider ID: 107522

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

BELEN, NEZER

License Type: NP

Provider ID: 107522

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Hours: M-F
 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

License Type: NP
 Provider ID: 287227
 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

DRISCOLL, SUSAN

License Type: NP
 Provider ID: 287227

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

License Type: NP
 Provider ID: 107522
 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

GARCIA, JOHNNY

License Type: NP
 Provider ID: 107522
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): License Type: NP

N

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA

License Type: NP

Provider ID: 287227

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

HAMID, WAHIDA

Provider ID: 287227

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

License Type: NP

Provider ID: 287227

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

HARPEL, SHERYL

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95009329

NPI: 1780177147

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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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

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C. دليل الرعاية الأولية

PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

License Type: NP
Provider ID: 107522
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

KELLOGG, KRISTEN

License Type: NP
Provider ID: 107522
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

License Type: NP
Provider ID: 25729
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

LEONARD, BEVERLY

License Type: NP
Provider ID: 25729
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

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American Sign Language (ASL): Provider ID: 25729

N

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

LU, TAMMY

License Type: NP

Provider ID: 25729

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

LU, TAMMY

License Type: NP

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

License Type: NP

Provider ID: 25729

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

 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

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA

License Type: NP

Provider ID: 25729

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

 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

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C. دليل الرعاية الأولية

 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

License Type: NP
Provider ID: 110598
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

License Type: NP
Provider ID: 36508
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

OCHOA, ERLINDA

License Type: NP
Provider ID: 110598
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

License Type: NP
Provider ID: 36508
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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: NPF

Provider ID: 107522

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

License Type: NPF

Provider ID: 107522

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

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

License Type: NPF

Provider ID: 107522

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

License Type: NPF

Provider ID: 107522

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

OLVERA, LUISA

License Type: NP

Provider ID: 313072

Provider Gender: Female

License Number: NP95001710

NPI: 1598161309

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

DAP HEALTH INC

 133 W MAIN ST

EL CAJON, CA 92020

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619) 873-8940

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OLVERA, LUISA

License Type: NP

Provider ID: 313072

Provider Gender: Female

License Number: NP95001710

NPI: 1598161309

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

DAP HEALTH INC

 133 W MAIN ST

EL CAJON, CA 92020

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619) 873-8940

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

REAL, MARIA

License Type: NP

Provider ID: 36508

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

REAL, MARIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: NP
 Provider ID: 36508
 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

License Type: NP
 Provider ID: 287227

Provider Gender: Female
 License Number: NP95022460
 NPI: 1477218121
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: 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

REGEV, SHANEE

License Type: NP
 Provider ID: 287227
 Provider Gender: Female
 License Number: NP95022460
 NPI: 1477218121
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: 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

REID, EMILY

License Type: NP
 Provider ID: 36508
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY

License Type: NP
 Provider ID: 36508
 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

SWAN, MELANIE

License Type: NP
 Provider ID: 25729

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

SWAN, MELANIE

License Type: NP
 Provider ID: 25729
 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

License Type: NP
 Provider ID: 36508
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

VERDUZCO GONZALEZ, AURORA

License Type: NP
Provider ID: 36508
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.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

VILLANUEVA DE GUTIE, BERENICE

License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

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-5PM

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE,

BERENICE

License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

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-5PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

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.

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, BREAHA

License Type: NP

Provider ID: 36508

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

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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
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 107522

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 NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 107522

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

CHIROPRACTOR

HOURIHAN, KEITH

License Type: DC

Provider ID: 110598

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

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.

C. دليل الرعاية الأولية

 **Provider Language(s)**
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5983
 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

HOURIHAN, KEITH

License Type: DC

Provider ID: 110598

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
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

License Type: DC

Provider ID: 107522

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

License Type: DC

Provider ID: 107522

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

License Type: DC

Provider ID: 25729

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

 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

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

SOSA, DAVID

License Type: DC
Provider ID: 25729
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

License Type: DC
Provider ID: 107522
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

CHIROPRACTOR

UY, ASHLEY

License Type: DC
Provider ID: 107522
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

License Type: MD
Provider ID: 107522
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: (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.

C. دليل الرعاية الأولية

 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

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE

License Type: MD

Provider ID: 107522

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: (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

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A146838

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

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

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A146838

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

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

FAMILY PRACTICE

AL ANI, NAJWAN

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 107522
 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

AL ANI, NAJWAN

License Type: MD
 Provider ID: 107522
 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

License Type: MD
 Provider ID: 287227
 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):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

License Type: MD
 Provider ID: 287227
 Provider Gender: Female
 License Number: A167529
 NPI: 1316310840
☐ Provider English Spoken: Y
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

License Type: MD
 Provider ID: 107522
 Provider Gender: Female
 License Number: A183464
 NPI: 1821677584
☐ 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.

C. دليل الرعاية الأولية

 *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

BAIN, NATALIE

License Type: MD
Provider ID: 107522
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

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

FAMILY PRACTICE

BROWN, BRANDON

License Type: MD
Provider ID: 107522
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

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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

BROWN, BRANDON

License Type: MD
Provider ID: 107522
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

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 Website: www.fhcsd.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
8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

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BRUHN, JOSHUA

License Type: MD

Provider ID: 107522

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

BRUHN, JOSHUA

License Type: MD

Provider ID: 107522

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

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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

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

FAMILY PRACTICE

CORMAN, DANIEL

License Type: DO

Provider ID: 107522

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

CORMAN, DANIEL

License Type: DO

Provider ID: 107522

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

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 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

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 287227
 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

DOMINGUEZ, DENNIS

License Type: MD
 Provider ID: 287227
 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

GHAFAARI, DAUOD

License Type: MD
 Provider ID: 313072
 Provider Gender: Male
 License Number: A98486
 NPI: 1053417691
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940

Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

GHAFAARI, DAUOD

License Type: MD
 Provider ID: 313072
 Provider Gender: Male
 License Number: A98486
 NPI: 1053417691
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 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

FAMILY PRACTICE

GORDON, CHRISTOPHER

License Type: MD

Provider ID: 107522

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

GORDON, CHRISTOPHER

License Type: MD

Provider ID: 107522

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

License Type: MD

Provider ID: 25729

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

HASTANAN, CAROL

License Type: MD

Provider ID: 25729

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

License Type: MD

Provider ID: 107522

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: 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

HODGKIN, EDWARD

License Type: MD

Provider ID: 107522

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

License Type: MD

Provider ID: 287227

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

KASAWA, JOHN

License Type: MD

Provider ID: 287227

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



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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

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A161682

NPI: 1841726148

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C. دليل الرعاية الأولية

 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

 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

MANDOYAN, AUSTIN

License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A161682
NPI: 1841726148
 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

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EL CAJON, CA 92020
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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
 Hours: M-F
8:30AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

NASSIR, BASSAM

License Type: MD
Provider ID: 287227
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

NASSIR, BASSAM

License Type: MD
Provider ID: 287227
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

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Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

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C. دليل الرعاية الأولية

NIAZI, HARRIS

License Type: MD

Provider ID: 107522

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

NIAZI, HARRIS

License Type: MD

Provider ID: 107522

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

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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

License Type: MD

Provider ID: 308887

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

 181 REA AVE

EL CAJON, CA 92020

 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

FAMILY PRACTICE

PUTRUS, RAMIZ

License Type: MD

Provider ID: 36508

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.or
g

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.

C. دليل الرعاية الأولية

FAMILY PRACTICE

PUTRUS, RAMIZ

License Type: MD

Provider ID: 308887

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

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

PUTRUS, RAMIZ

License Type: MD

Provider ID: 36508

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

SALEM, RAMSEY

License Type: MD

Provider ID: 287227

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

SALEM, RAMSEY

License Type: MD

Provider ID: 287227

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

License Type: DO

Provider ID: 36508

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

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
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
License Type: DO
Provider ID: 110598
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 36508
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
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 110598
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,
Provider ID: 25729
NPI: 1104861681
Provider English Spoken: Y
Cultural Competency: N
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

 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

**CHASE AVENUE FAMILY
HEALTH CTRS INC,**
Provider ID: 25729
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

**DAP HEALTH-CENTRO
MEDICO EL CAJON,**
Provider ID: 313072
NPI: 1154480069
 Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
 133 W MAIN ST
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)
873-8940
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FQHC

**DAP HEALTH-CENTRO
MEDICO EL CAJON,**
Provider ID: 313072
NPI: 1154480069
 Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
 133 W MAIN ST
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)
873-8940
 Website: N/A
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: 107522
NPI: 1932561198
 Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF
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

**FAMILY HLTH CTR SAN
DIEGO-EL CAJON,**
Provider ID: 107522
NPI: 1932561198

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
Cultural Competency: N
FAMILY HEALTH CENTERS OF
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: 110598
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):
N

 Accessibility: CONTACT
PROVIDER

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

FQHC

**LA MAESTRA CHC EL CAJON
BROADWAY,**

Provider ID: 110598
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):
N

 Accessibility: CONTACT
PROVIDER

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

FQHC

LA MAESTRA CHC-REA AVE,

Provider ID: 308887
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 CHC-REA AVE,

Provider ID: 308887
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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8:30AM-5:30PM	LA MAESTRA FAMILY CLINIC  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-F 8:30AM-5PM	 Hours: M-F 8AM-5PM
FQHC LA MAESTRA FAMILY CLINIC INC, Provider ID: 36508 NPI: 1336353721  Provider English Spoken: Y Cultural Competency: N LA MAESTRA FAMILY CLINIC  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-F 8:30AM-5PM	FQHC SAN YSIDRO HEALTH EL CAJON, Provider ID: 287227 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	FQHC SAN YSIDRO HEALTH EL CAJON, Provider ID: 287227 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
FQHC LA MAESTRA FAMILY CLINIC INC, Provider ID: 36508 NPI: 1336353721  Provider English Spoken: Y Cultural Competency: N	FQHC SAN YSIDRO HEALTH EL CAJON, Provider ID: 287227 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	HEPATOLOGY GISH, ROBERT License Type: MD Provider ID: 36508 Provider Gender: Male License Number: G45632 NPI: 1548281322  Provider English Spoken: Y  Provider Language(s) Spoken: Dutch, French, Spanish, 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
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

HEPATOLOGY

GISH, ROBERT

License Type: MD
Provider ID: 36508
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

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

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

License Type: MD
Provider ID: 313072
Provider Gender: Male
License Number: A151547
NPI: 1134513211

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
DAP HEALTH INC

133 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 873-8940
Fax: (619) 401-0522

After Hours Phone: (619) 873-8940
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

License Type: MD
Provider ID: 313072
Provider Gender: Male
License Number: A151547
NPI: 1134513211
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
DAP HEALTH INC

133 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 873-8940
Fax: (619) 401-0522
After Hours Phone: (619) 873-8940
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALWASH, MUSTAFA

License Type: MD
Provider ID: 107522
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

ALWASH, MUSTAFA

License Type: MD
Provider ID: 107522
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

License Type: DO
Provider ID: 287227
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
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

AWDISHO, ALAN

License Type: DO
Provider ID: 287227
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
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

License Type: MD
Provider ID: 107522
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: 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

DUONG, MAI

License Type: MD

Provider ID: 107522

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

License Type: MD

Provider ID: 107522

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

GORGES, RANDA

License Type: MD

Provider ID: 107522

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
 Provider ID: 110598
 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
 CENTER SACRAMENTO,
 PIONEERS MEMORIAL
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, PALOMAR
 MEDICAL CENTER
 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
JABRI, ZAIN
 License Type: MD
 Provider ID: 110598
 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
 CENTER SACRAMENTO,
 PIONEERS MEMORIAL
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, PALOMAR
 MEDICAL CENTER
 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
MALINAK, JAMES
 License Type: MD
 Provider ID: 287227
 Provider Gender: Male
 License Number: G52238
 NPI: 1497867501
☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 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

INTERNAL MEDICINE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MALINAK, JAMES

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: G52238

NPI: 1497867501

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

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

INTERNAL MEDICINE

MANSY, TAMARA

License Type: MD

Provider ID: 287227

Provider Gender: Female

License Number: A164238

NPI: 1396277737

 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

MANSY, TAMARA

License Type: MD

Provider ID: 287227

Provider Gender: Female

License Number: A164238

NPI: 1396277737

 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

MAY, LOUIS

License Type: MD

Provider ID: 287227

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

MAY, LOUIS

License Type: MD

Provider ID: 287227

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD
Provider ID: 287227
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

MICHAEL, RAMI

License Type: MD
Provider ID: 287227
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

License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A175325
NPI: 1770072290
 Provider English Spoken: Y
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
8:30AM-5:30PM

INTERNAL MEDICINE

NADI, FAHIMA

License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A175325
NPI: 1770072290

 Provider English Spoken: Y
 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

License Type: MD
Provider ID: 287227

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

NARAYAN, ARCHANA

License Type: MD
Provider ID: 287227
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

License Type: DO
Provider ID: 107522
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
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
 525 E MAIN 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 صباحاً حتى 6:00 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) 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

PARIKH, MILIND

License Type: DO
 Provider ID: 107522
 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
 Grossmont Hospital, SHARP
 MEMORIAL HOSPITAL, SHARP
 CHULA VISTA 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

INTERNAL MEDICINE

PETITT, JOHN

License Type: MD
 Provider ID: 313072
 Provider Gender: Male
 License Number: G52812
 NPI: 1497992432
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522

 After Hours Phone: (619) 873-8940
 Website: N/A

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PETITT, JOHN

License Type: MD

Provider ID: 313072
 Provider Gender: Male
 License Number: G52812
 NPI: 1497992432
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619) 873-8940
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

REDDY, ARJUN

License Type: MD
 Provider ID: 129312
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: MD
Provider ID: 110598
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, WADI

License Type: MD
Provider ID: 36508
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

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

License Type: MD
Provider ID: 110598
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

g
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, WADI

License Type: MD

Provider ID: 36508

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

g
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

License Type: MD

Provider ID: 287227

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

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

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

License Type: MD

Provider ID: 287227

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

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

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: C144411

NPI: 1790744795

Provider English Spoken: Y

Provider Language(s)
Spoken: Armenian, Hebrew

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON

License Type: MD
Provider ID: 287227
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
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

YOON, TAE HYUN

License Type: MD
Provider ID: 107522
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

INTERNAL MEDICINE

YOON, TAE HYUN

License Type: MD
Provider ID: 107522
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
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N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM

INTERVENTIONAL

CARDIOLOGY

KAFRI, HASSAN

License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A96002

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

NPI: 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

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN

License Type: MD

Provider ID: 287227

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

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🕒 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

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO

Provider ID: 107522

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, TRI
CITY MEDICAL CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, Adventist Health
and Rideout, UC SAN DIEGO
HEALTH - EAST CAMPUS
MEDICAL CENTER, Sharp
Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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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

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO

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Provider ID: 107522

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, TRI

CITY MEDICAL CTR, SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, Adventist Health

and Rideout, UC SAN DIEGO

HEALTH - EAST CAMPUS

MEDICAL CENTER, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 107522

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

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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

BUECHNER, CHARLENE

License Type: MD

Provider ID: 107522

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

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☐ Phone: (619) 515-2498

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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

BULLOCH, EDGAR

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C. دليل الرعاية الأولية

License Type: MD

Provider ID: 313072

Provider Gender: Male

License Number: A113241

NPI: 1508046376

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

DAP HEALTH INC

☐ 133 W MAIN ST

EL CAJON, CA 92020

☐ Phone: (619) 873-8940

Fax: (619) 401-0522

☐ After Hours Phone: (619)
873-8940

☐ Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

☐ Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

License Type: MD

Provider ID: 313072

Provider Gender: Male

License Number: A113241

NPI: 1508046376

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

DAP HEALTH INC

☐ 133 W MAIN ST

EL CAJON, CA 92020

☐ Phone: (619) 873-8940

Fax: (619) 401-0522

☐ After Hours Phone: (619)
873-8940

☐ 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

License Type: MD

Provider ID: 107522

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

CARTER, KHALIL

License Type: MD

Provider ID: 107522

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

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C. دليل الرعاية الأولية

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
 License Type: MD
 Provider ID: 107522
 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
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
 License Type: MD
 Provider ID: 107522
 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
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 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

DE MIK, TRAVIS
 License Type: MD
 Provider ID: 107522
 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

DE MIK, TRAVIS
 License Type: MD
 Provider ID: 107522
 Provider Gender: Male
 License Number: A108228
 NPI: 1629277322
 Provider English Spoken: Y

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Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 107522
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

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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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 107522
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

License Type: MD
Provider ID: 107522
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
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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

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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
Provider ID: 107522
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

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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
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

License Type: MD
Provider ID: 110598
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
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-6PM
SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

License Type: MD
Provider ID: 110598
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)
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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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 107522
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

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C. دليل الرعاية الأولية

 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

LIPSCHITZ, LISA

License Type: MD
 Provider ID: 107522
 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
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

License Type: MD
 Provider ID: 287227
 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
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

License Type: MD
 Provider ID: 287227
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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

PAPA, RHETT
 License Type: DO
 Provider ID: 313072
 Provider Gender: Male
 License Number: 20A11733
 NPI: 1063642312
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 Website: N/A

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT
 License Type: DO
 Provider ID: 313072
 Provider Gender: Male
 License Number: 20A11733
 NPI: 1063642312

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 DAP HEALTH INC

 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 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
 License Type: MD
 Provider ID: 107522
 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

SAPRA, SONIA
 License Type: MD
 Provider ID: 107522
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi
 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 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

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

License Type: DO
Provider ID: 107522
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

STABEN, REBECCA

License Type: DO
Provider ID: 107522
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

ZIEG, ALAN

License Type: MD
Provider ID: 107522
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD
Provider ID: 107522
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
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

JARDON, JAVIER

License Type: MD
Provider ID: 287227
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

JARDON, JAVIER

License Type: MD
Provider ID: 287227
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

License Type: MD
Provider ID: 287227
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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, 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

OPHTHALMOLOGY

MANI, NASRIN

License Type: MD

Provider ID: 287227

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

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

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

PAPASTERGIOU, GEORGIOS

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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

License Type: MD
 Provider ID: 287227
 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

PONS, MAURICIO

License Type: MD
 Provider ID: 287227
 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

License Type: MD
 Provider ID: 287227
 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

OPHTHALMOLOGY

SKAF, AYHAM

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 287227
 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

License Type: MD
 Provider ID: 36508
 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
 After Hours Phone: (619)
 280-4213
 Website: www.lamaestra.or
 g
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ADJAN, ROULA

License Type: MD
 Provider ID: 36508
 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
 After Hours Phone: (619)
 280-4213

 Website: www.lamaestra.or
 g
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ALWAHAB, AREEJ

License Type: MD
 Provider ID: 308468
 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\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 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

CONE, STEPHANIE

License Type: MD
 Provider ID: 36508
 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

License Type: MD
 Provider ID: 110598
 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

CONE, STEPHANIE

License Type: MD
 Provider ID: 36508

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

License Type: MD
 Provider ID: 110598
 Provider Gender: Female
 License Number: A123929
 NPI: 1437444858
 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.

C. دليل الرعاية الأولية

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

FIGUEROA RODRIGUEZ, BRENDA
License Type: MD
Provider ID: 313072
Provider Gender: Female
License Number: A114674
NPI: 1134205214
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
DAP HEALTH INC
133 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 873-8940
Fax: (619) 401-0522
After Hours Phone: (619)
873-8940
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA
License Type: MD
Provider ID: 313072
Provider Gender: Female
License Number: A114674
NPI: 1134205214
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
DAP HEALTH INC
133 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 873-8940

Fax: (619) 401-0522
After Hours Phone: (619)
873-8940
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

FLEMING, TARA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A152462
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PEDIATRICS

FLEMING, TARA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A152462

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

JACKSON, DANA

License Type: DO

Provider ID: 107522

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

JACKSON, DANA

License Type: DO

Provider ID: 107522

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

License Type: MD

Provider ID: 36508

Provider Gender: Female

License Number: A110010

NPI: 1033441316

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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.

C. دليل الرعاية الأولية

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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 110598

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

JONES, SETAREH

License Type: MD

Provider ID: 36508

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.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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 110598

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

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 107522

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

KODSI, ALICIA

License Type: MD

Provider ID: 107522

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

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 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

License Type: MD

Provider ID: 25729

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

NAGNUR, PRITI

License Type: MD

Provider ID: 25729

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

License Type: MD

Provider ID: 285853

Provider Gender: Female

NPI: 1902156904

 Provider English Spoken: Y

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C. دليل الرعاية الأولية

 **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
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, VI

License Type: MD
Provider ID: 285862
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

License Type: MD
Provider ID: 285966
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

License Type: MD
Provider ID: 287227
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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

PEDIATRICS

RODRIGUEZ, ALDO
 License Type: MD
 Provider ID: 287227
 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

PEDIATRICS

STENSMAN, LARS
 License Type: MD
 Provider ID: 313072
 Provider Gender: Male
 License Number: A158569
 NPI: 1659638062
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Danish, French,
 Norwegian, Swedish
 Cultural Competency: N
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

STENSMAN, LARS
 License Type: MD
 Provider ID: 313072
 Provider Gender: Male
 License Number: A158569

NPI: 1659638062
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Danish, French,
 Norwegian, Swedish
 Cultural Competency: N
 Board Certified Specialty: No
 DAP HEALTH INC
 133 W MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

ALYAS, ALISIA
 License Type: PA
 Provider ID: 110598
 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)

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

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

ALYAS, ALISIA

License Type: PA
 Provider ID: 36508
 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
 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

License Type: PA
 Provider ID: 110598
 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

ALYAS, ALISIA

License Type: PA
 Provider ID: 36508
 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
 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

ARMENTA, JORGE

License Type: PA
 Provider ID: 36508
 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

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 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

License Type: PA

Provider ID: 36508

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

MERCER, KELLY

License Type: PA

Provider ID: 36508

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

PHYSICIANS ASSISTANT

MERCER, KELLY

License Type: PA

Provider ID: 110598

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

PHYSICIANS ASSISTANT

MERCER, KELLY

License Type: PA

Provider ID: 110598

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

License Type: PA
 Provider ID: 36508
 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
 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

PHYSICIANS ASSISTANT

PATEL, SHREYA

License Type: PA
 Provider ID: 25729
 Provider Gender: Female

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

PHYSICIANS ASSISTANT

PATEL, SHREYA

License Type: PA
 Provider ID: 25729
 Provider Gender: Female
 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

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

License Type: PA
 Provider ID: 287227
 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
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

License Type: PA

Provider ID: 287227

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
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

TURNER, ERIC

License Type: PA

Provider ID: 25729

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

PHYSICIANS ASSISTANT

TURNER, SHEREENA

License Type: PA

Provider ID: 107522

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

PHYSICIANS ASSISTANT

TURNER, ERIC

License Type: PA

Provider ID: 25729

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

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C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

License Type: PA
Provider ID: 107522
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

PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE

License Type: PA
Provider ID: 313072

Provider Gender: Male
License Number: PA16673
NPI: 1104836659
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
DAP HEALTH INC

 133 W MAIN ST
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)
873-8940
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE

License Type: PA
Provider ID: 313072
Provider Gender: Male
License Number: PA16673
NPI: 1104836659
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
DAP HEALTH INC
 133 W MAIN ST
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)

873-8940

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PODIATRIST

CHARP, KENNETH

License Type: DPM
Provider ID: 313072
Provider Gender: Male
License Number: DPM1536
NPI: 1841384203
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
DAP HEALTH INC
 133 W MAIN ST
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)
873-8940
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PODIATRIST

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

CHARP, KENNETH

License Type: DPM

Provider ID: 313072

Provider Gender: Male

License Number: DPM1536

NPI: 1841384203

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

DAP HEALTH INC

 133 W MAIN ST

EL CAJON, CA 92020

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619)
873-8940

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA

License Type: DPM

Provider ID: 107522

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) 515-2498

 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

License Type: DPM

Provider ID: 107522

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) 515-2498

 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

LE, DIANA

License Type: DPM

Provider ID: 107522

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,

Foothill Regional Medical

Center

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Accessibility: CONTACT PROVIDER

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

PODIATRIST

LE, DIANA

License Type: DPM
Provider ID: 107522
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,
Foothill Regional Medical
Center
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

License Type: PT
Provider ID: 107522
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

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

License Type: PT
Provider ID: 107522
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

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

License Type: PT
Provider ID: 287227
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

DASCENZO, EMILY

License Type: PT

Provider ID: 287227

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

GONZALEZ, JUSTINE ARIEL

License Type: PT

Provider ID: 107522

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

GONZALEZ, JUSTINE ARIEL

License Type: PT

Provider ID: 107522

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

License Type: PT

Provider ID: 287227

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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.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

KUIOKA, TROY
 License Type: PT
 Provider ID: 287227
 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
 License Type: PT
 Provider ID: 107522
 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) 515-2498
 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

MIGNEA, DAVID
 License Type: PT
 Provider ID: 107522
 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) 515-2498
 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

ENCINITAS

PEDIATRICS

BRION, SONJA
 License Type: MD
 Provider ID: 205039
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

MENDENHALL, ANNA

License Type: MD
Provider ID: 204809
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

License Type: MD
Provider ID: 205166
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 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

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

TOLBA, KAMEI

License Type: MD
Provider ID: 204458
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
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C. دليل الرعاية الأولية

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

ESCONDIDO

CERTIFIED NURSE PRACTITIONER

CARNEY, AMY

License Type: NP

Provider ID: 289855

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

CARNEY, AMY

License Type: NP

Provider ID: 289855

Provider Gender: Female

License Number: NP8169

NPI: 1164445227

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

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 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

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 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

License Type: NP

Provider ID: 313071

Provider Gender: Male

License Number: NP95003024

NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
DAP HEALTH INC

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760) 871-0606

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

License Type: NP

Provider ID: 313071

Provider Gender: Male

License Number: NP95003024

NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
DAP HEALTH INC

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

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C. دليل الرعاية الأولية

 After Hours Phone: (760) 871-0606

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

License Type: NP

Provider ID: 289769

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, 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

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

License Type: NP

Provider ID: 289769

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, 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

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP

Provider ID: 289769

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

CERTIFIED NURSE PRACTITIONER

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License Type: NP

Provider ID: 289769

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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

CHIROPRACTOR

ROBINSON, DEAN

License Type: DC

Provider ID: 289876

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

ROBINSON, DEAN

License Type: DC

Provider ID: 289876

Provider Gender: Male

License Number: DC12036

NPI: 1851320337

☐ 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

CHIROPRACTOR

ZECHA, RONALD

License Type: DC

Provider ID: 289876

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
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☎ 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-12PM

CHIROPRACTOR

ZECHA, RONALD

License Type: DC

Provider ID: 289876

Provider Gender: Male

License Number: DC28605

NPI: 1427252121

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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C. دليل الرعاية الأولية

SA 8AM-12PM

FAMILY PRACTICE

ARRIETA, NOEMI

License Type: DO

Provider ID: 289769

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

 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

ARRIETA, NOEMI

License Type: DO

Provider ID: 289769

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

 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

License Type: MD

Provider ID: 289876

Provider Gender: Male

License Number: A159727

NPI: 1962936450

 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-12PM

FAMILY PRACTICE

AVILA, MICHAEL

License Type: MD

Provider ID: 289876

Provider Gender: Male

License Number: A159727

NPI: 1962936450

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
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SA 8AM-12PM

FAMILY PRACTICE

CASTANER, ZALYA

License Type: MD

Provider ID: 289855

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

License Type: MD

Provider ID: 289876

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

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 Phone: (760) 520-8100

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Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A139490

NPI: 1487072179

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FAMILY PRACTICE

CASTANER, ZALYA

License Type: MD

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License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N

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IHP OF SOUTHERN CAL-PHP

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FAMILY PRACTICE

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COBIAN, VANESSA

License Type: MD
 Provider ID: 289855
 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
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FAMILY PRACTICE

COBIAN, VANESSA

License Type: MD
 Provider ID: 289855
 Provider Gender: Female
 License Number: A145349
 NPI: 1134513039
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 Cultural Competency: N
 Board Certified Specialty: No
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8AM-8PM
 TH-F 8AM-5PM

FAMILY PRACTICE

COX, VICTORIA

License Type: MD
 Provider ID: 289769
 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

COX, VICTORIA

License Type: MD
 Provider ID: 289769
 Provider Gender: Female
 License Number: C171064
 NPI: 1093087819
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
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 Website: N/A
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 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FERRAIOLO, NATALIE

License Type: MD
 Provider ID: 289876
 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

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C. دليل الرعاية الأولية

 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-12PM

FAMILY PRACTICE

FERRAIOLO, NATALIE

License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A152372
NPI: 1306290143

 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

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

FAMILY PRACTICE

HAMILTON, LISA MARIE

License Type: DO
Provider ID: 304810
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

HAMILTON, LISA MARIE

License Type: DO
Provider ID: 304810
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

License Type: MD
Provider ID: 289876
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
SA 8AM-12PM

FAMILY PRACTICE

KAUR, JATINDER

License Type: MD

Provider ID: 289876

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-12PM

FAMILY PRACTICE

LAI, AMARA

License Type: MD

Provider ID: 289855

Provider Gender: Female

License Number: A120348

NPI: 1790912855

 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

LAI, AMARA

License Type: MD

Provider ID: 289855

Provider Gender: Female

License Number: A120348

NPI: 1790912855

 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

MCHENRY, KATHRYN

License Type: DO

Provider ID: 289876

Provider Gender: Female

License Number: 20A14292

NPI: 1326458373

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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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-12PM

FAMILY PRACTICE

MCHENRY, KATHRYN

License Type: DO

Provider ID: 289876

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-12PM

FAMILY PRACTICE

NAKAMURA, MELANIE

License Type: MD

Provider ID: 289876

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-12PM

FAMILY PRACTICE

NAKAMURA, MELANIE

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A107557

NPI: 1104022672

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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 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-12PM

FAMILY PRACTICE

PATEL, JITENBHAI

License Type: MD

Provider ID: 289876

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
 After Hours Phone: (760) 520-8100

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD
 Provider ID: 289855
 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

PATEL, JITENBHAI

License Type: MD
 Provider ID: 289855
 Provider Gender: Male

License Number: A94128
 NPI: 1902921406
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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 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

PATEL, JITENBHAI

License Type: MD
 Provider ID: 289876
 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
 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

RAO, USHA

License Type: MD
 Provider ID: 289769
 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

RAO, USHA

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 289769
 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

License Type: MD
 Provider ID: 289876
 Provider Gender: Female
 License Number: A82173
 NPI: 1699706333
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, 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

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

License Type: MD
 Provider ID: 289876
 Provider Gender: Female
 License Number: A82173
 NPI: 1699706333
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, 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

FAMILY PRACTICE

RODARTE, GABRIEL

License Type: MD
 Provider ID: 289865
 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

FAMILY PRACTICE

RODARTE, GABRIEL

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 289865
 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

FAMILY PRACTICE

SANDHU, BASANT

License Type: MD
 Provider ID: 289855
 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

SANDHU, BASANT

License Type: MD
 Provider ID: 289855
 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

License Type: MD
 Provider ID: 289855
 Provider Gender: Male
 License Number: G61829
 NPI: 1356376164
☐ Provider English Spoken: Y
☐ Provider Language(s)
 Spoken: Farsi, Modern
 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
 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.

C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

License Type: MD

Provider ID: 289876

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Modern
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

License Type: MD

Provider ID: 289855

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Modern
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

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

License Type: MD

Provider ID: 289876

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Modern
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

TANTOD, KULIN

License Type: MD

Provider ID: 289876

Provider Gender: Male

License Number: A109655

NPI: 1902058928

 Provider English Spoken: Y

 Provider Language(s)

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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

FAMILY PRACTICE

TANTOD, KULIN

License Type: MD
Provider ID: 289876
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
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

THOMPSON, CHERYL

License Type: MD
Provider ID: 289876
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-12PM

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-12PM

FAMILY PRACTICE

THOMPSON, CHERYL

License Type: MD
Provider ID: 289876
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
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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-12PM

FQHC

DAP HEALTH-CENTRO

MEDICO ESCONDIDO,

Provider ID: 313071
NPI: 1023349883
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (858) 634-6918

After Hours Phone: (760) 871-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

DAP HEALTH-CENTRO

MEDICO ESCONDIDO,

Provider ID: 313071

NPI: 1023349883

Provider English Spoken: Y
Cultural Competency: N

DAP HEALTH INC

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 871-0606

Fax: (858) 634-6918

After Hours Phone: (760) 871-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 304810

NPI: 1417640491

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

ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 304810

NPI: 1417640491

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: 289876

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 ESCONDIDO,

Provider ID: 289876

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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: 289873
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 PEDIATRICS AND PRENATAL,

Provider ID: 289873
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: 289865
NPI: 1265618185

☐ Provider English Spoken: Y
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 PEDS AND PRENATAL,

Provider ID: 289865
NPI: 1265618185

☐ Provider English Spoken: Y
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

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

PARKWAY,

Provider ID: 289855

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

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY,

Provider ID: 289855

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: 289769

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

🕒 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE,

Provider ID: 289769

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

🕒 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

AGUERO, AMETHYST

License Type: DO

Provider ID: 304810

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

AGUERO, AMETHYST

License Type: DO
Provider ID: 304810
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

License Type: MD
Provider ID: 289769
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
 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

CARRERA, JORGE

License Type: MD
Provider ID: 289769
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
 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

License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A61751
NPI: 1659305084
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, Mandarin, Modern Greek, Spanish
Cultural Competency: N

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C. دليل الرعاية الأولية

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-12PM

INTERNAL MEDICINE

CHEN, MARGARET

License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A61751
NPI: 1659305084
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Modern 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-12PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

License Type: MD
Provider ID: 289876
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-12PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

License Type: MD

Provider ID: 289876

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-12PM

PEDIATRICS

AGUILAR, EDITA

License Type: MD

Provider ID: 289873

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

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

ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

AGUILAR, EDITA

License Type: MD
 Provider ID: 289865
 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

PEDIATRICS

AGUILAR, EDITA

License Type: MD
 Provider ID: 289873
 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

AGUILAR, EDITA

License Type: MD
 Provider ID: 289865
 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

PEDIATRICS

ALDANA, NANCY

License Type: MD
 Provider ID: 289873
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

ALDANA, NANCY

License Type: MD
Provider ID: 289873
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

License Type: MD
Provider ID: 289876
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

CHOW, BYRON

License Type: MD

Provider ID: 289876

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

License Type: MD

Provider ID: 305159

Provider Gender: Female

NPI: 1215021274

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: 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
 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

License Type: MD
Provider ID: 305160
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-12PM

PEDIATRICS

CURET, ZULMA

License Type: MD
Provider ID: 289876
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

CURET, ZULMA

License Type: MD
Provider ID: 289876
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Provider ID: 289873

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DOSHI, NEELIMA

License Type: MD

Provider ID: 289873

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

License Type: MD

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

IBRAHIM, MAGED

License Type: MD

Provider Gender: Male

License Number: C141296

NPI: 1306852934

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: POMONA

VALLEY HOSP MED CTR, SAN

ANTONIO COMM HOSP

Board Certified Specialty: No

DAP HEALTH INC

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760)
871-0606

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

IBRAHIM, MAGED

License Type: MD

Provider ID: 313071

Provider Gender: Male

License Number: C141296

NPI: 1306852934

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: POMONA

VALLEY HOSP MED CTR, SAN

ANTONIO COMM HOSP

Board Certified Specialty: No

DAP HEALTH INC

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C. دليل الرعاية الأولية

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

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Fax: (858) 634-6918

After Hours Phone: (760)
871-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALEKSHAMRAN, KEYVAN

License Type: MD

Provider ID: 313071

Provider Gender: Male

License Number: A94845

NPI: 1952466112

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

DAP HEALTH INC

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 871-0606

Fax: (858) 634-6918

After Hours Phone: (760)
871-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALEKSHAMRAN, KEYVAN

License Type: MD

Provider ID: 313071

Provider Gender: Male

License Number: A94845

NPI: 1952466112

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

DAP HEALTH INC

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 871-0606

Fax: (858) 634-6918

After Hours Phone: (760)
871-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

PEDIATRICS

SONG, JOYCE

License Type: DO

Provider ID: 305166

Provider Gender: Female

NPI: 1417510694

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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

PEDIATRICS

STRAZICICH, KARLA

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A45413

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C. دليل الرعاية الأولية

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

STRAZICICH, KARLA

License Type: MD

Provider ID: 289876

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

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 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**

License Type: MD

Provider ID: 289873

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

**TELLECHEA-SANCHEZ,
 SELMIRA**

License Type: MD

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Provider Gender: Female

License Number: G83438

NPI: 1730288747

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 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
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 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

THIRUNAGARI, HARRSHA

License Type: MD

Provider ID: 313071

Provider Gender: Female

License Number: A64928

NPI: 1447472212

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C. دليل الرعاية الأولية

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Telugu
 Cultural Competency: N
 Hospital Affiliation: EL
 CENTRO REGIONAL MEDICAL
 CENTER, RIVERSIDE
 COMMUNITY HOSP, Parkview
 Community Hospital Medical
 Center
 Board Certified Specialty: No
 DAP HEALTH INC
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 Fax: (858) 634-6918
 After Hours Phone: (760)
 871-0606
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

THIRUNAGARI, HARRSHA

License Type: MD
 Provider ID: 313071
 Provider Gender: Female
 License Number: A64928
 NPI: 1447472212
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,

Telugu
 Cultural Competency: N
 Hospital Affiliation: EL
 CENTRO REGIONAL MEDICAL
 CENTER, RIVERSIDE
 COMMUNITY HOSP, Parkview
 Community Hospital Medical
 Center
 Board Certified Specialty: No
 DAP HEALTH INC
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 Fax: (858) 634-6918
 After Hours Phone: (760)
 871-0606
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

License Type: PA
 Provider ID: 289769
 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

BAISLEY, SHAWN

License Type: PA
 Provider ID: 289769
 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

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 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SHARPE, NORMA

License Type: PA

Provider ID: 289769

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

PHYSICIANS ASSISTANT

SHARPE, NORMA

License Type: PA

Provider ID: 289769

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

License Type: DPM

Provider ID: 289855

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

PODIATRIST

NEGRON, RICARDO

License Type: DPM

Provider ID: 289855

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

APRIL, MONIQUE

License Type: NPF

Provider ID: 298304

Provider Gender: Female

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C. دليل الرعاية الأولية

License Number: NP95009340
NPI: 1093288730

 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 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

License Type: NPF

Provider ID: 298304

Provider Gender: Female

License Number: NP95009340

NPI: 1093288730

 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

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 After Hours Phone: (760)
723-6200

 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 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

License Type: NPF

Provider ID: 298304

Provider Gender: Female

License Number: NP95009340

NPI: 1093288730

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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W-TH 8:30AM-4PM

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Provider Gender: Female

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NPI: 1093288730

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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 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

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PROVIDER

Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730

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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FALLBROOK, CA 92028
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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 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730

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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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 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF
Provider ID: 298304
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-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF
Provider ID: 298304
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

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C. دليل الرعاية الأولية

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-12:30PM
 W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF
 Provider ID: 298304
 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
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License Type: NPF

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C. دليل الرعاية الأولية

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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

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

 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

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP
Provider ID: 298304
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License Number: NP95003447
NPI: 1245695006

 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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License Number: NP95003447
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PROVIDER

CERTIFIED NURSE

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C. دليل الرعاية الأولية

PRACTITIONER

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License Type: NP

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Provider Gender: Female

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 Provider English Spoken: Y

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American Sign Language (ASL):

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PROVIDER

CERTIFIED NURSE

PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP

Provider ID: 298304

Provider Gender: Female

License Number: NP95013844

NPI: 1083813661

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CHRISTUS

SANTA ROSA MEDICAL

CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

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TU 8AM-12:30PM
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CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP
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License Number: NP95013844
NPI: 1083813661

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SANTA ROSA MEDICAL
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Board Certified Specialty: No
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C. دليل الرعاية الأولية

CENTER

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

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Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

License Type: NP

Provider ID: 298304

Provider Gender: Male

License Number: NP95015717

NPI: 1081497284

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

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CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

License Type: NP

Provider ID: 298304

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NPI: 1801497284

 Provider English Spoken: Y

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 Hours: M 8AM-4PM
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FQHC

FALLBROOK FAMILY HLTH

CTR,
 Provider ID: 289871
 NPI: 1982756086
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
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FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 298304
 NPI: 1316501562
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 321 E ALVARADO ST
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FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 298304
 NPI: 1649662719
 Provider English Spoken: Y
 Cultural Competency: N
 IHP OF SOUTHERN CAL-PHP
 321 E ALVARADO ST
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FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 298304
 NPI: 1851300123
 Provider English Spoken: Y
 Cultural Competency: N

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FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 298304

NPI: 1851300123

Provider English Spoken: Y
Cultural Competency: N

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Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 298304

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 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 298304

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 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE

License Type: MD

Provider ID: 289871

Provider Gender: Male

License Number: G37412

NPI: 1538234190

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

After Hours Phone: (760) 451-4720

Website: N/A

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

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE

License Type: MD

Provider ID: 289871

Provider Gender: Male

License Number: G37412

NPI: 1538234190

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

After Hours Phone: (760)
451-4720

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

DEL RE, AMANDA

License Type: MD

Provider ID: 201533

Provider Gender: Female

NPI: 1548499957

Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY 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

LINARES, YENDI

License Type: MD

Provider ID: 279215

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,
SOUTHWEST HEALTHCARE
INLAND VALLEY 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

License Type: MD

Provider ID: 204471

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

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 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

PEDIATRICS

VU, WENDY

License Type: MD
Provider ID: 289871
Provider Gender: Female
License Number: A169529
NPI: 1508148370

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4770
 After Hours Phone: (760)
451-4770

 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-7:30PM
SA 8AM-5PM

PEDIATRICS

VU, WENDY

License Type: MD
Provider ID: 289871
Provider Gender: Female
License Number: A169529
NPI: 1508148370

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4770
 After Hours Phone: (760)
451-4770

 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-7:30PM
SA 8AM-5PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL

License Type: DO
Provider ID: 289864
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

FAMILY PRACTICE

JOHNSON, DANIEL

License Type: DO
Provider ID: 289864
Provider Gender: Male
License Number: 20A9393
NPI: 1245311216

 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: 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: 289864

NPI: 1790718351

Provider English Spoken: Y

Cultural Competency: N

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

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

**IMPERIAL BEACH HEALTH
CENTER,**

Provider ID: 289864

NPI: 1790718351

Provider English Spoken: Y

Cultural Competency: N

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

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

License Type: MD

Provider ID: 289864

Provider Gender: Female

License Number: A66830

NPI: 1780609990

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: 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

INTERNAL MEDICINE

RYAN, DANA

License Type: MD

Provider ID: 289864

Provider Gender: Female

License Number: A66830

NPI: 1780609990

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language

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Cultural Competency: N
Hospital Affiliation: 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

PEDIATRICS

DOKICH, SRETENKA

License Type: MD

Provider ID: 289864

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

PEDIATRICS

DOKICH, SRETENKA

License Type: MD

Provider ID: 289864

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: 307283

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: (760) 765-1278

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

CLINIC OUTPATIENT

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,

Provider ID: 307283

NPI: 1235804139

Provider English Spoken: Y
Cultural Competency: N

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IHP OF SOUTHERN CAL-PHP

2721 WASHINGTON ST
JULIAN, CA 92036
Phone: (619) 662-4100
Fax: (760) 765-1278
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

WYLIE, BLAKE

License Type: DO
Provider ID: 307283
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) 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

WYLIE, BLAKE

License Type: DO
Provider ID: 307283
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) 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 JULIAN FAMILY MEDICINE,

Provider ID: 307283
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: (760) 765-1278
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 JULIAN FAMILY MEDICINE,

Provider ID: 307283
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: (760) 765-1278
After Hours Phone: (619) 662-4100

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 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

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN

License Type: MD
 Provider ID: 279603
 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-12PM

PEDIATRICS

GANDHI, SHEETAL

License Type: MD
 Provider ID: 205020
 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

PARSONS, GENEVIEVE

License Type: MD
 Provider ID: 206224
 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):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

ROBERTS, KENDALL

License Type: MD
 Provider ID: 205024
 Provider Gender: Male
 NPI: 1265762033
 Provider English Spoken: Y

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C. دليل الرعاية الأولية

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

TUNG, VIVIAN

License Type: MD
Provider ID: 204348
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\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LA MESA

PEDIATRICS

MOLINOS, NICOLE

License Type: MD
Provider ID: 279283
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

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA

License Type: DC
Provider ID: 289859
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

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

CHIROPRACTOR

PAGE, BIANCA

License Type: DC

Provider ID: 289859

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

FERRAIOLO, NATALIE

License Type: MD

Provider ID: 289859

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

FERRAIOLO, NATALIE

License Type: MD

Provider ID: 289859

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

License Type: MD

Provider ID: 289859

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

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

License Type: MD

Provider ID: 289859

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: 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: 289859

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

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 289859

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

MANNINO, ELIZABETH

License Type: MD

Provider ID: 289859

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

GENERAL PRACTICE

MANNINO, ELIZABETH

License Type: MD

Provider ID: 289859

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)

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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

License Type: MD
 Provider ID: 289859
 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

INTERNAL MEDICINE

MCFARLAND, NATHAN

License Type: MD
 Provider ID: 289859
 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

License Type: NP
 Provider ID: 46661
 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

ALLEN, KATHERINE

License Type: NP
 Provider ID: 46661
 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

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 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
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 515-2550
 Website: N/A

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

License Type: NP

Provider ID: 46661

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

TOTH, JESSICA

License Type: NP

Provider ID: 46661

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

License Type: NP

Provider ID: 46661

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 46661

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
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 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL): NPI: 1730448101

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

License Type: DO

Provider ID: 46661

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

 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

CHOU, BILL

License Type: DO

Provider ID: 46661

Provider Gender: Male

License Number: 20A14794

 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

FAMILY PRACTICE

DORN, TIA

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: C172318

NPI: 1285074740

 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

FAMILY PRACTICE

DORN, TIA

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: C172318

NPI: 1285074740

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

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LEMON GROVE, CA 91945

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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD

Provider ID: 46661

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

FAMILY PRACTICE

KIM, YUHEE

License Type: MD

Provider ID: 46661

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

**LEMONGROVE FAMILY
HEALTH CENTER,**

Provider ID: 46661

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

FQHC

**LEMONGROVE FAMILY
HEALTH CENTER,**

Provider ID: 46661

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

License Type: MD

Provider ID: 46661

Provider Gender: Male

License Number: A165925

NPI: 1245689488

☐ 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

 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

GALLARES, DANIEL

License Type: MD
Provider ID: 46661
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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 46661
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

BUECHNER, CHARLENE

License Type: MD
Provider ID: 46661
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

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 46661
 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

CARTER, KHALIL

License Type: MD
 Provider ID: 46661
 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

License Type: MD
 Provider ID: 46661
 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
 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

CHAKRABARTI, PRIYA

License Type: MD
 Provider ID: 46661
 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

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

 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 / GYNCOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 46661
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 / GYNCOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 46661
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

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515-2550
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNCOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 46661
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
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNCOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 46661
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: MD
Provider ID: 46661
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

 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

HANLEY, LAUREN

License Type: MD
Provider ID: 46661
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

 7592 BROADWAY
LEMON GROVE, CA 91945
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 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

License Type: MD
Provider ID: 46661
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

LIPSCHITZ, LISA

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 46661

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

SAPRA, SONIA

License Type: MD

Provider ID: 46661

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
PROVIDER

 Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 46661

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

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO

Provider ID: 46661

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

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515-2550

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Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 46661

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO

Provider ID: 46661

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

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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

ZIEG, ALAN

License Type: MD

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) 515-2550

 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 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD

Provider ID: 46661

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) 515-2550

 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 8AM-5PM

PEDIATRICS

JACKSON, DANA

License Type: DO

Provider ID: 46661

Provider Gender: Female

License Number: 20A14119

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C. دليل الرعاية الأولية

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

 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

JACKSON, DANA

License Type: DO

Provider ID: 46661

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

 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

License Type: PA

Provider ID: 46661

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

PHYSICIANS ASSISTANT

FLEMING, DAVID

License Type: PA

Provider ID: 46661

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

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NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

License Type: NP

Provider ID: 109486

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

 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

AQUINO, FELINO

License Type: NP

Provider ID: 25518

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.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

AQUINO, FELINO

License Type: NP

Provider ID: 25518

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.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

AQUINO, FELINO

License Type: NP

Provider ID: 109486

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

 2101 GRANGER AVE
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 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.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 8AM-5PM

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA

License Type: NP
Provider ID: 58606
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

DHARKAR-SURBER, SAPNA

License Type: NP

Provider ID: 58606

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

License Type: NP

Provider ID: 109486

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

License Type: NP

Provider ID: 25518

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

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C. دليل الرعاية الأولية

☐ 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

LIM, IMELDA

License Type: NP

Provider ID: 25518

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.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

LIM, IMELDA

License Type: NP

Provider ID: 109486

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.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-5PM

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH

License Type: NP

Provider ID: 121626

Provider Gender: Female

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

LUM, YUIN-WAH

License Type: NP

Provider ID: 121626

Provider Gender: Female

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C. دليل الرعاية الأولية

License Number: NP95010663
NPI: 1942764477

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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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

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE

License Type: NP
Provider ID: 58606
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

NEVAREZ, IRENE

License Type: NP
Provider ID: 58606
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

License Type: NP
Provider ID: 58606
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

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⌚ Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

License Type: NP

Provider ID: 58606

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.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

REAL, MARIA

License Type: NP

Provider ID: 58606

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.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

REAL, MARIA

License Type: NP

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License Number: NP17328

NPI: 1548450471

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Spanish

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MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
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🌐 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

REID, EMILY

License Type: NP

Provider ID: 58606

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

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C. دليل الرعاية الأولية

 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

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License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

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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

License Type: NP
Provider ID: 58606
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

VERDUZCO GONZALEZ,

AURORA

License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
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N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE

License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

 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
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

**VILLANUEVA DE GUTIE,
BERENICE**

License Type: NP
Provider ID: 58606
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
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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, BREAHA
License Type: NP
Provider ID: 58606
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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA
License Type: NP
Provider ID: 58606
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

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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
License Type: DC
Provider ID: 58606
Provider Gender: Male
License Number: DC29314
NPI: 1306916994

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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

CHIROPRACTOR

HOURIHAN, KEITH

License Type: DC
 Provider ID: 58606
 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

License Type: MD
 Provider ID: 42839
 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: 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

ALGHAMDI, ASMA

License Type: MD
 Provider ID: 42839
 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: 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

ANDAYA, MIKHAEL

License Type: MD
 Provider ID: 121626
 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

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

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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

ANDAYA, MIKHAEL

License Type: MD

Provider ID: 121626

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
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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

FAMILY PRACTICE

BAEZ, BEATRICE

License Type: MD

Provider ID: 25518

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.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-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE

BAEZ, BEATRICE

License Type: MD

Provider ID: 25518

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

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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

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

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C. دليل الرعاية الأولية

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A157488

NPI: 1316479892

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

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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

CANLAS, AVELINO

License Type: MD

Provider ID: 25518

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

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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

FAMILY PRACTICE

CANLAS, AVELINO

License Type: MD

Provider ID: 25518

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.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

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD

Provider ID: 25520

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD

Provider ID: 25520

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

License Type: MD

Provider ID: 25520

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

License Type: MD

Provider ID: 25520

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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C. دليل الرعاية الأولية

FAMILY PRACTICE

DILLON, MAYRA

License Type: MD

Provider ID: 25520

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: 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

DILLON, MAYRA

License Type: MD

Provider ID: 25520

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: 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

LANUZA, MARK J

License Type: DO

Provider ID: 121626

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

LANUZA, MARK J

License Type: DO

Provider ID: 121626

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

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C. دليل الرعاية الأولية

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

License Type: MD

Provider ID: 42839

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LAW, KAREN

License Type: MD

Provider ID: 42839

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

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 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

LEUTE, ERIC

License Type: MD

Provider ID: 42839

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)
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

LEUTE, ERIC

License Type: MD

Provider ID: 42839

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

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C. دليل الرعاية الأولية

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) 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

MEDINA, ALEXANDER

License Type: MD
Provider ID: 247959
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

MEDINA, ALEXANDER

License Type: MD
Provider ID: 247959
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

MOHAMED, NADIA

License Type: MD

Provider ID: 42839

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: 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

MOHAMED, NADIA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A146819

NPI: 1477947364

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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C. دليل الرعاية الأولية

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: 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

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 42839

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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 42839

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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NIKZAD, JASON

License Type: DO

Provider ID: 247959

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

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

NIKZAD, JASON

License Type: DO

Provider ID: 247959

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

 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

License Type: MD

Provider ID: 25520

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: 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

NOLASCO, JOANNA

License Type: MD

Provider ID: 25520

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: 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

OCEGUEDA, JOSHUA

License Type: MD

Provider ID: 25520

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: 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

OCEGUEDA, JOSHUA

License Type: MD

Provider ID: 25520

Provider Gender: Male

License Number: A165184

NPI: 1336643345

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
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: 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

RICHARDSON, DANIELLE

License Type: MD
Provider ID: 42839
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RICHARDSON, DANIELLE

License Type: MD
Provider ID: 42839
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROBERTS, POMAI

License Type: MD
Provider ID: 25520
Provider Gender: Female
License Number: A103218
NPI: 1023278314

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1136 D AVE
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
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

ROBERTS, POMAI

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 25520
 Provider Gender: Female
 License Number: A103218
 NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 1136 D AVE
 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
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
 License Type: DO
 Provider ID: 58606
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD
 License Type: DO
 Provider ID: 58606
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN
 License Type: DO
 Provider ID: 42839
 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: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN
 License Type: DO
 Provider ID: 42839
 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: 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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

STONES, RACHEL

License Type: MD

Provider ID: 58606

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.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: TH 8AM-2PM

FAMILY PRACTICE

STONES, RACHEL

License Type: MD

Provider ID: 58606

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.or
g

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

License Type: MD

Provider ID: 42839

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

 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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

License Type: MD

Provider ID: 42839

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

 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: www.syhealth.org

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: 121626

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):

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

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 121626

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):

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: 58606

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

**LA MAESTRA FAMILY CLINIC
INC,**

Provider ID: 58606

NPI: 1336353721

 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.

C. دليل الرعاية الأولية

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: 25518

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 - NATIONAL C,

Provider ID: 25518

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: 109486

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,

Provider ID: 109486

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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C. دليل الرعاية الأولية

 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 25520

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: 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

NATIONAL CITY,

Provider ID: 25520

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: 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

PARADISE HILLS,

Provider ID: 42839

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) 259-2811

 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

PARADISE HILLS,

Provider ID: 42839

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) 259-2811

 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 SOUTH BAY,

Provider ID: 247959

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 247959

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

License Type: MD

Provider ID: 58606

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

HEPATOLOGY

GISH, ROBERT

License Type: MD

Provider ID: 58606

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

ROUEL, WADI

License Type: MD

Provider ID: 58606

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

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

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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

INTERNAL MEDICINE

ROUEL, WADI

License Type: MD
Provider ID: 58606
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
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): License Type: MD

N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5:30PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

License Type: MD
Provider ID: 58606
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.or

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 58606
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.or

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: A118227
NPI: 1851667661
Provider English Spoken: Y
Provider Language(s)
Spoken: Faroese, Fataleka

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA
License Type: MD
Provider ID: 42839
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

BAILONY, MOHAMMED
License Type: MD
Provider ID: 204571
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
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
License Type: MD
Provider ID: 204623
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

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

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

BONSU, BEMA

License Type: MD

Provider ID: 25520

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

BONSU, BEMA

License Type: MD

Provider ID: 25520

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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

License Type: MD

Provider ID: 58606

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

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

CONE, STEPHANIE

License Type: MD

Provider ID: 58606

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C. دليل الرعاية الأولية

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

 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

DABU, LISA

License Type: MD

Provider ID: 310258

Provider Gender: Female

NPI: 1881128254

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

 502 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 475-6204

Fax: (619) 475-5174

 After Hours Phone: (619)
475-6204

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

DAY, CHRISTOPHER

License Type: MD

Provider ID: 121626

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

DAY, CHRISTOPHER

License Type: MD

Provider ID: 121626

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

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 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

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

TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA

License Type: MD
Provider ID: 204715
Provider Gender: Female
NPI: 1346258787
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
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

License Type: MD
Provider ID: 204938
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
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

RANA, DEBORAH

License Type: MD
Provider ID: 42839
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

RANA, DEBORAH

License Type: MD
Provider ID: 42839
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

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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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

UY, CARMELITA

License Type: MD

Provider ID: 204563

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

License Type: MD

Provider ID: 204503

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

License Type: PA

Provider ID: 58606

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

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.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

PHYSICIANS ASSISTANT

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ARMENTA, JORGE

License Type: PA
Provider ID: 58606
Provider Gender: Male
License Number: PA13694
NPI: 1346382611

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

PHYSICIANS ASSISTANT

BANGS, SASHA

License Type: PA
Provider ID: 121626
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

BANGS, SASHA

License Type: PA
Provider ID: 121626
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

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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

License Type: PA
Provider ID: 58606
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

MARTINEZ-MURGUIA, IRENE

License Type: PA
Provider ID: 58606
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Provider Language(s)

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C. دليل الرعاية الأولية

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

License Type: PA
Provider ID: 58606
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

PHYSICIANS ASSISTANT

MERCER, KELLY

License Type: PA
Provider ID: 58606
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
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NATIONAL CITY, CA 91950
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 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

License Type: NP
Provider ID: 289902
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

License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571

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C. دليل الرعاية الأولية

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

License Type: NP

Provider ID: 289902

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

License Type: NP

Provider ID: 289902

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

License Type: NP

Provider ID: 289902

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

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C. دليل الرعاية الأولية

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO

License Type: NP

Provider ID: 289902

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

License Type: NP

Provider ID: 289857

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

License Type: NP

Provider ID: 305294

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

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 Website: N/A

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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License Type: NP

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Provider Gender: Female

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 Provider Language(s)
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CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

License Type: NP

Provider ID: 289902
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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CERTIFIED NURSE **PRACTITIONER**

CHRISTY, TYLER

License Type: NPF
Provider ID: 289902
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971

 **Provider English Spoken:** Y
Cultural Competency: N

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

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON

License Type: NP

Provider ID: 289902
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
 Phone: (760) 631-5000
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CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768

 **Provider English Spoken:** Y
Cultural Competency: N

Board Certified Specialty: No
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CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF

Provider ID: 289902
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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 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

EVERETT, ELIZABETH

License Type: NPF
Provider ID: 289902
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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C. دليل الرعاية الأولية

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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SA 9AM-4PM

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Board Certified Specialty: No
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American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

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SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

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C. دليل الرعاية الأولية

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP
Provider ID: 289943
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

License Type: NP
Provider ID: 304702
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

License Type: NP
Provider ID: 289899
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

License Type: NP

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C. دليل الرعاية الأولية

Provider ID: 304701
 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):
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 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

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

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Medi-Cal Open Panel: Yes

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American Sign Language (ASL):
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 PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

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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CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

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Provider ID: 289902

Provider Gender: Female

License Number: NP95006826

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C. دليل الرعاية الأولية

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

CERTIFIED NURSE **PRACTITIONER**

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289943

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

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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

License Type: NP

Provider ID: 304702

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

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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

License Type: NP

Provider ID: 289899

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

License Type: NP

Provider ID: 304701

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

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nityclinic.org
Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289902
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
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CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
License Type: NPF
Provider ID: 289902

Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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 Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

 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

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 SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

 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

HOWELL, AMANDA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

 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

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

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289899

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

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-TU 8AM-5PM
 W 8AM-7PM
 TH-F 8AM-5PM
 SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 304701

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 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

 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-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289899

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 **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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American Sign Language (ASL):
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 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

License Type: NP

Provider ID: 289902

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

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SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

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License Type: NP

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Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

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 Hours: M-F 8AM-5PM
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C. دليل الرعاية الأولية

 Hours: M-F 8AM-5PM
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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

License Type: DO

Provider ID: 289902

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 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

 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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License Type: DO

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NPI: 1003172016

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No
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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
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FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

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 Provider Gender: Female
 License Number: 20A12958
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 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
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 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
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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
 SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH

License Type: DO
 Provider ID: 289902
 Provider Gender: Female
 License Number: 20A18374
 NPI: 1831354026

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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

License Type: DO
 Provider ID: 289902
 Provider Gender: Female
 License Number: 20A18374
 NPI: 1831354026
 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
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH

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 N
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PROVIDER

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

FAMILY PRACTICE

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 American Sign Language (ASL):
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 PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH

License Type: DO
 Provider ID: 289902
 Provider Gender: Female

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License Number: 20A18374

NPI: 1831354026

 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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PROVIDER

 Hours: M-F 8AM-5PM
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License Type: DO

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Provider Gender: Female

License Number: 20A18374

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Cultural Competency: N

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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

KETCHEL, CLINT

License Type: MD

Provider ID: 289902

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,

TRI CITY MEDICAL CTR,

WHITTIER HOSPITAL MEDICAL
CENTER

Board Certified Specialty: No
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 Phone: (760) 631-5000

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FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289902

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 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
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Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

TRI CITY MEDICAL CTR,

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C. دليل الرعاية الأولية

WHITTIER HOSPITAL MEDICAL CENTER

Board Certified Specialty: No
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 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, TRI CITY MEDICAL CTR,

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Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,
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
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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

License Type: MD

Provider ID: 304701

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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
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

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

License Type: MD

Provider ID: 289902

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,
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

License Type: MD

Provider ID: 289902

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,
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

License Type: MD

Provider ID: 289899

Provider Gender: Male

License Number: A135564

NPI: 1699038125

 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.

C. دليل الرعاية الأولية

Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
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
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

License Type: MD
Provider ID: 304701
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,
TRI CITY MEDICAL CTR,
WHITTIER HOSPITAL MEDICAL
CENTER
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
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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

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD
Provider ID: 289902
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,
TRI CITY MEDICAL CTR,
WHITTIER HOSPITAL MEDICAL
CENTER
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):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MILLER, DIANA

License Type: DO
Provider ID: 289943
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: 20A17371

NPI: 1407204969

 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

 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

FAMILY PRACTICE

MILLER, DIANA

License Type: DO

Provider ID: 304702

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

 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

 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

FAMILY PRACTICE

MILLER, DIANA

License Type: DO

Provider ID: 289943

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

 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

 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

FAMILY PRACTICE

MILLER, DIANA

License Type: DO

Provider ID: 304702

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

 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

 517 N HORNE ST
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL): Provider ID: 289902

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

Provider ID: 289902

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
SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

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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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

License Type: DO

Provider ID: 289902

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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 Phone: (760) 631-5000

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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

NGUYEN, DANIELA

License Type: DO

Provider ID: 289902

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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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO
Provider ID: 289902
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.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

NGUYEN, DANIELA

License Type: DO
Provider ID: 289902
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.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

PANICKER, CIBU

License Type: MD

Provider ID: 289902

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.vistacommu-nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

License Type: MD

Provider ID: 289902

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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 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

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FAMILY PRACTICE

PANICKER, CIBU

License Type: MD

Provider ID: 289902

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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 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

License Type: MD

Provider ID: 289902

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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 After Hours Phone: (760)
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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

License Type: MD

Provider ID: 289902

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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OCEANSIDE, CA 92057

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 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

FAMILY PRACTICE

PANICKER, CIBU

License Type: MD

Provider ID: 289902

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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 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

VIDAL, MONICA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: DO
Provider ID: 289902
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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO
Provider ID: 289902
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
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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
SA 9AM-4PM

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO
Provider ID: 289902
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
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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
SA 9AM-4PM

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO
Provider ID: 289902
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

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C. دليل الرعاية الأولية

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 289902

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

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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

VIDAL, MONICA

License Type: DO

Provider ID: 289902

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: 289857

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

TRUECARE,

Provider ID: 289857

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: 289902

NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N

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.

C. دليل الرعاية الأولية

 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-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902

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): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902

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-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902

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-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 ID: 289943

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 289902

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-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,

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

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,

Provider ID: 304702

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

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,

Provider ID: 289943

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

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,

Provider ID: 304702

NPI: 1609094036

 Provider English Spoken: Y

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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

FQHC

**VISTA COMMUNITY CLINIC
PIER VIEW WAY,**

Provider ID: 289899

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: 304701

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: 289899

NPI: 1629357355

Provider English Spoken: Y
Cultural Competency: N

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

Hours: M-TU 8AM-5PM
W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

FQHC

**VISTA COMMUNITY CLINIC
PIER VIEW WAY,**

Provider ID: 304701

NPI: 1629357355

Provider English Spoken: Y
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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C. دليل الرعاية الأولية

nityclinic.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

License Type: MD
Provider ID: 289902
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: 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

INTERNAL MEDICINE

HASSANI, FARZANEH

License Type: MD
Provider ID: 289902
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: 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

INTERNAL MEDICINE

HASSANI, FARZANEH

License Type: MD
Provider ID: 289902
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: 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

INTERNAL MEDICINE

HASSANI, FARZANEH

License Type: MD
Provider ID: 289902
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: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

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

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

INTERNAL MEDICINE

HASSANI, FARZANEH

License Type: MD

Provider ID: 289902

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: 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

INTERNAL MEDICINE

HASSANI, FARZANEH

License Type: MD

Provider ID: 289902

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: 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

PEDIATRICS

CALHOUN, CHANELLE

License Type: MD

Provider ID: 303883

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

CALHOUN, CHANELLE

License Type: MD

Provider ID: 289857

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

License Type: MD

Provider ID: 305294

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

License Type: MD

Provider ID: 305294

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

License Type: MD

Provider ID: 289857

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

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C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 289857
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

License Type: MD
Provider ID: 305294
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

License Type: MD
Provider ID: 289857
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
 Provider ID: 305294
 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

License Type: MD
 Provider ID: 303869
 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-4:30PM

PEDIATRICS

DANIELS, SARAH

License Type: MD
 Provider ID: 204869
 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
 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA

License Type: MD
 Provider ID: 289899
 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
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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

License Type: MD
 Provider ID: 304701
 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
 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

License Type: MD
 Provider ID: 289899
 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
 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

License Type: MD
 Provider ID: 304701
 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
 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

License Type: MD

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Provider ID: 278249
 Provider Gender: Female
 NPI: 1467833467
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, TRI CITY MEDICAL CTR
 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-12PM

PEDIATRICS

MAC, VICTOR

License Type: DO
 Provider ID: 289857
 Provider Gender: Male
 License Number: 20A17766
 NPI: 1790281236
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:

COMMUNITY HOSPITAL OF
 THE MONTEREY PENINSULA
 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

MAC, VICTOR

License Type: DO
 Provider ID: 305294
 Provider Gender: Male
 License Number: 20A17766
 NPI: 1790281236
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 COMMUNITY HOSPITAL OF
 THE MONTEREY PENINSULA
 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):
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 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-4:30PM

PEDIATRICS

MAC, VICTOR

License Type: DO
 Provider ID: 289857
 Provider Gender: Male
 License Number: 20A17766
 NPI: 1790281236
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 COMMUNITY HOSPITAL OF
 THE MONTEREY PENINSULA
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
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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

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C. دليل الرعاية الأولية

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

MAC, VICTOR

License Type: DO

Provider ID: 305294

Provider Gender: Male

License Number: 20A17766

NPI: 1790281236

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY HOSPITAL OF
THE MONTEREY PENINSULA

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

MACINTYRE, ELIZABETH

License Type: MD

Provider ID: 282327

Provider Gender: Female

NPI: 1336520766

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

 3605 VISTA WAY 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

MCCAMMACK, BRADLEY

License Type: MD

Provider ID: 289902

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

License Type: MD

Provider ID: 289902

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

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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

PEDIATRICS

MCCAMMACK, BRADLEY

License Type: MD

Provider ID: 289902

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

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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

License Type: MD

Provider ID: 289902

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

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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

License Type: MD

Provider ID: 289902

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
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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

PEDIATRICS

MCCAMMACK, BRADLEY

License Type: MD

Provider ID: 289902

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

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C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 204370
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 STE 130
OCEANSIDE, CA 92056
Phone: (760) 547-1010
After Hours Phone: (760) 547-1010
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

NOVOTA, GABRIELA

License Type: MD
Provider ID: 309792
Provider Gender: Female
NPI: 1154520096
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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\18
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

PARK, RONALD

License Type: MD
Provider ID: 303868
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SA 8AM-4:30PM

PEDIATRICS

PERKINS, RACHEL

License Type: MD

Provider ID: 206313

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
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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

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

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

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

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

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

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C. دليل الرعاية الأولية

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

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

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

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

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

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

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

POWAY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

KAUR, JATINDER

License Type: MD

Provider ID: 289883

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

FAMILY PRACTICE

KAUR, JATINDER

License Type: MD

Provider ID: 289883

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: 289883

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

FQHC

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER,

Provider ID: 289883

NPI: 1023518768

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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POWAY, CA 92064

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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

License Type: MD

Provider ID: 289883

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

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C. دليل الرعاية الأولية

 **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

CURET, ZULMA

License Type: MD
Provider ID: 289883
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

License Type: MD
Provider ID: 204859
Provider Gender: Female
NPI: 1427345487
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO,
PALOMAR MEDICAL CENTER
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

License Type: MD
Provider ID: 204611
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, PALOMAR MEDICAL
CENTER
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

MOREIRA, LUCILA

License Type: DO

Provider ID: 276093

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,
PALOMAR MEDICAL CENTER
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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8AM-5PM

PEDIATRICS

MORTIMER, DORI

License Type: MD

Provider ID: 204396

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, PALOMAR MEDICAL
CENTER

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

RAMGREN, AILEEN

License Type: DO

Provider ID: 223702

Provider Gender: Female

NPI: 1356785505

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

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

TAI, KUANGKAI

License Type: MD

Provider ID: 204807

Provider Gender: Male

NPI: 1396744066

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C. دليل الرعاية الأولية

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, Mandarin,
 Spanish

Cultural Competency: N
 Hospital Affiliation: PALOMAR
 HEALTH, RADY CHILDRENS
 HOSPITAL SAN DIEGO,
 PALOMAR MEDICAL CENTER
 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-12PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

License Type: PA
 Provider ID: 289883
 Provider Gender: Female
 License Number: PA23310
 NPI: 1649692369

 Provider English Spoken: Y

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-4:30PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

License Type: PA
 Provider ID: 289883
 Provider Gender: Female
 License Number: PA23310
 NPI: 1649692369

 Provider English Spoken: Y
 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-4:30PM

RAMONA

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH

License Type: NP
 Provider ID: 289875
 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

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH

License Type: NP

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C. دليل الرعاية الأولية

Provider ID: 289875
 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: 289875
 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-12PM

FQHC

TRUECARE,
 Provider ID: 289875
 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-12PM

INTERNAL MEDICINE

HO, LYSA
 License Type: DO
 Provider ID: 289875
 Provider Gender: Female
 License Number: 20A17507

NPI: 1821494337
☐ 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
 Hours: M-F 8AM-5PM
 SA 8AM-12PM

INTERNAL MEDICINE

HO, LYSA
 License Type: DO
 Provider ID: 289875
 Provider Gender: Female
 License Number: 20A17507
 NPI: 1821494337
☐ 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

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C. دليل الرعاية الأولية

☎ 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-12PM

INTERNAL MEDICINE

YUNG, DORIS

License Type: MD

Provider ID: 289875

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): License Type: PA

N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YUNG, DORIS

License Type: MD

Provider ID: 289875

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
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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

REIFENBERGER, JODY

Provider ID: 289875

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
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Min/Max Age: 0\None

American Sign Language (ASL):
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♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

License Type: PA

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Provider Gender: Female

License Number: PA22669

NPI: 1386741072

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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RAMONA, CA 92065

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760)

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C. دليل الرعاية الأولية

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

License Type: PA
Provider ID: 289875
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

PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

License Type: PA
Provider ID: 289875

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

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

License Type: NP
Provider ID: 203755
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

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

License Type: NP
Provider ID: 112894
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
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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM	AQUINO, FELINO License Type: NP Provider ID: 112894 Provider Gender: Male License Number: NP22974 NPI: 1356684781	License Number: NP10769 NPI: 1801881552  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	 Provider English Spoken: Y  Provider Language(s) Spoken: Tagalog Cultural Competency: N Board Certified Specialty: No OPERATION SAMAHAN	 1501 IMPERIAL AVE SAN DIEGO, CA 92101  Phone: (619) 233-8500  After Hours Phone: (619) 233-8500
AQUINO, FELINO License Type: NP Provider ID: 203755 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 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	 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	 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	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>
 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-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM	ARTS, SERENA License Type: NPF Provider ID: 289863 Provider Gender: Female License Number: NP10769 NPI: 1801881552  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	 1501 IMPERIAL AVE SAN DIEGO, CA 92101  Phone: (619) 233-8500  After Hours Phone: (619) 233-8500  Website: N/A
 Accessibility: CONTACT PROVIDER	ARTS, SERENA License Type: NPF Provider ID: 289863 Provider Gender: Female	 1501 IMPERIAL AVE SAN DIEGO, CA 92101  Phone: (619) 233-8500  After Hours Phone: (619) 233-8500  Website: N/A
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</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.

C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 25517

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA

License Type: NPF

Provider ID: 25517

Provider Gender: Female

License Number: NP95024510

NPI: 1558058636

 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

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA

License Type: NPF

Provider Gender: Female

License Number: NP95024510

NPI: 1558058636

 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

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER

License Type: NP

Provider ID: 78906

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

BELEN, NEZER

License Type: NP

Provider ID: 78906

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	NPI: 1871577023  Provider English Spoken: Y Cultural Competency: N	662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes
CERTIFIED NURSE PRACTITIONER	Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	Min/Max Age: 0\None American Sign Language (ASL): N
BURNS, DELLA License Type: NP Provider ID: 289882 Provider Gender: Female License Number: NP7413 NPI: 1871577023  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	 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	 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM SA 8AM-4PM
CERTIFIED NURSE PRACTITIONER	CERTIFIED NURSE PRACTITIONER	CERTIFIED NURSE PRACTITIONER
CELESTIN-RAMSEY, AKANKE License Type: NPF Provider ID: 217520 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	CELESTIN-RAMSEY, AKANKE License Type: NPF Provider ID: 217520 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	CELESTIN-RAMSEY, AKANKE License Type: NPF Provider ID: 217520 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
CERTIFIED NURSE PRACTITIONER	CERTIFIED NURSE PRACTITIONER	CERTIFIED NURSE PRACTITIONER
BURNS, DELLA License Type: NP Provider ID: 289882 Provider Gender: Female License Number: NP7413	CELESTIN-RAMSEY, AKANKE License Type: NPF Provider ID: 217520 Provider Gender: Female License Number: NP8563 NPI: 1447450275  950 S EUCLID AVE SAN DIEGO, CA 92114  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100	CELESTIN-RAMSEY, AKANKE License Type: NPF Provider ID: 217520 Provider Gender: Female License Number: NP8563 NPI: 1447450275  950 S EUCLID AVE SAN DIEGO, CA 92114  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100

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C. دليل الرعاية الأولية

 Hours: M-F 8AM-5PM
SA 8AM-4PM

CERTIFIED NURSE PRACTITIONER

CHASE, AVA

License Type: NP
Provider ID: 25731
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

CHASE, AVA

License Type: NP
Provider ID: 25731
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

CORREA, ANN MARIE

License Type: NPF
Provider ID: 289869
Provider Gender: Female
License Number: NP95033117
NPI: 1083420814

 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

CORREA, ANN MARIE

License Type: NPF
Provider ID: 289869
Provider Gender: Female
License Number: NP95033117
NPI: 1083420814

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Hours: M-F 8AM-5PM
Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

DAVIES-UPPAL, ALLISON

License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95026125
NPI: 1053002360

 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

DAVIES-UPPAL, ALLISON

License Type: NP
Provider ID: 289869

Provider Gender: Female
License Number: NP95026125
NPI: 1053002360

 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

DEMESSIE, RAHEL

License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95027483
NPI: 1619749041

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic
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

DEMESSIE, RAHEL

License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95027483
NPI: 1619749041

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic
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

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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 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA

License Type: NP

Provider ID: 46039

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

DHARKAR-SURBER, SAPNA

License Type: NP

Provider ID: 46039

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

License Type: NPF

Provider ID: 25731

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

GALLEGOS, CYNTHIA

License Type: NPF

Provider ID: 25731

Provider Gender: Female

License Number: NP95016217

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C. دليل الرعاية الأولية

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

License Type: NP

Provider ID: 78906

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

GARCIA, JOHNNY

License Type: NP

Provider ID: 78906

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

License Type: NP

Provider ID: 25731

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

GOLDFINGER, SARAH

License Type: NP

Provider ID: 25731

Provider Gender: Female

License Number: NP95011313

NPI: 1134686744

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C. دليل الرعاية الأولية

 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

GRAYSON, ANDREA

License Type: NPF
Provider ID: 25517
Provider Gender: Female
License Number: NP23206
NPI: 1447577671

 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-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA

License Type: NPF
Provider ID: 25517
Provider Gender: Female
License Number: NP23206
NPI: 1447577671

 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-5PM

SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

HA, THU

License Type: NP
Provider ID: 289872
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

 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

License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP95010517

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: NP

Provider ID: 289868

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

License Type: NP

Provider ID: 289868

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

License Type: NP

Provider ID: 289868

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

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 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

License Type: NP

Provider ID: 289872

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: NP95010517
NPI: 1346443983

 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

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA
LORRAINE

License Type: NP

Provider ID: 46039

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

HARRINGTON, BARBARA

LORRAINE

License Type: NP

Provider ID: 46039

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

License Type: NPF

Provider ID: 289863

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

HART, BECKY

License Type: NPF

Provider ID: 289863

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: 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

HEFNER, ANNA

License Type: NP

Provider ID: 25517

Provider Gender: Female

License Number: NP5512

NPI: 1588913537

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

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

HEFNER, ANNA

License Type: NP

Provider ID: 25517

Provider Gender: Female

License Number: NP5512

NPI: 1588913537

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No
OPERATION SAMAHAN

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 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

HILL, GENIELYN

License Type: NP

Provider ID: 25517

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PRACTITIONER

HILL, GENIELYN

License Type: NP

Provider ID: 25517

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
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

License Type: NP

Provider ID: 25517

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

License Type: NP

Provider ID: 25517

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

License Type: NP

Provider ID: 289872

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOANG, CHI

License Type: NP

Provider ID: 289872

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, ROSELYNN JOY

License Type: NP

Provider ID: 25732

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

 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, ROSELYNN JOY

License Type: NP

Provider ID: 25732

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

 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, ROSELYNN JOY

License Type: NP

Provider ID: 25731

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 25732

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY

License Type: NP

Provider ID: 25731

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

HOGAN, ROSELYNN JOY

License Type: NP

Provider ID: 25732

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

 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, ROSELYNN JOY

License Type: NP

Provider ID: 25732

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

 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

HORNEY, KRISTAN

License Type: NPF

Provider ID: 289863

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

HORNEY, KRISTAN

License Type: NPF
 Provider ID: 289863
 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

License Type: NP
 Provider ID: 289872
 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

License Type: NP
 Provider ID: 289872

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

JOHNSON, SHAWNA

License Type: NP
 Provider ID: 289882
 Provider Gender: Female
 License Number: NP95002518
 NPI: 1922237809

 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.

C. دليل الرعاية الأولية

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

JOHNSON, SHAWNA

License Type: NP
Provider ID: 289882
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

License Type: NP
Provider ID: 289863
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

KEMP, KATHRINE

License Type: NP
Provider ID: 289863
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

License Type: NP
Provider ID: 100648
Provider Gender: Male
License Number: NP17838
NPI: 1942456124

 Provider English Spoken: Y
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.

C. دليل الرعاية الأولية

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

KHAN, MATTHEW

License Type: NP

Provider ID: 100648

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

License Type: NP

Provider ID: 289872

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

KI, TRISH

License Type: NP

Provider ID: 289872

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

License Type: NPF

Provider ID: 298139

Provider Gender: Female

License Number: NP95027593

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

LENNON, RYAN

License Type: NPF

Provider ID: 298139

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

LIM, IMELDA

License Type: NP

Provider ID: 25517

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

LIM, IMELDA

License Type: NP

Provider ID: 25517

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

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235

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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

<u>PRACTITIONER</u>	<u>FAMILY HEALTH CENTERS OF</u>	<u>American Sign Language (ASL):</u>
LU, TAMMY License Type: NP Provider ID: 25731 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	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	N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM Indian Health Services: Y
<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>
LU, TAMMY License Type: NP Provider ID: 25731 Provider Gender: Female License Number: NP95007253 NPI: 1457879132  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No	MANZO, CORINA License Type: NPF Provider ID: 289869 Provider Gender: Female License Number: NP95020369 NPI: 1669087326  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish 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	MANZO, CORINA License Type: NPF Provider ID: 289869 Provider Gender: Female License Number: NP95020369 NPI: 1669087326  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA

License Type: NP

Provider ID: 78906

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

MARTIN, RIA

License Type: NP

Provider ID: 78906

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

License Type: NP

Provider ID: 289856

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
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

MARTINEZ, CAROLYN

License Type: NP

Provider ID: 289856

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETTEL MARIE

License Type: NP

Provider ID: 25517

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

MENDOZA, GRETTEL MARIE

License Type: NP

Provider ID: 25517

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

License Type: NPF

Provider ID: 289869

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

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

MORAN, TIFFANY

License Type: NPF

Provider ID: 289869

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PRACTITIONER

NEVAREZ, IRENE

License Type: NP

Provider ID: 46039

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

NEVAREZ, IRENE

License Type: NP

Provider ID: 46039

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

License Type: NP

Provider ID: 25517

Provider Gender: Female

License Number: NP95020179

NPI: 1417699869

 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

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA

License Type: NP

Provider ID: 25517

Provider Gender: Female

License Number: NP95020179

NPI: 1417699869

 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

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C. دليل الرعاية الأولية

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	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	American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM SA 8AM-2PM
<u>CERTIFIED NURSE PRACTITIONER</u> NOCEDA, ANA License Type: NP Provider ID: 289872 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 Medi-Cal Open Panel: Yes	<u>CERTIFIED NURSE PRACTITIONER</u> NOCEDA, ANA License Type: NP Provider ID: 289881 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\22	<u>CERTIFIED NURSE PRACTITIONER</u> NOCEDA, ANA License Type: NP Provider ID: 289872 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 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.

C. دليل الرعاية الأولية

⌚ Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

License Type: NP
Provider ID: 289881
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

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

OCAMPO, ELAINE

License Type: NP
Provider ID: 289868
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

License Type: NP
Provider ID: 289868
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

License Type: NP
Provider ID: 289872
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

OCAMPO, ELAINE

License Type: NP

Provider ID: 289868

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): License Type: NP

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

License Type: NP

Provider ID: 289868

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: 289872

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 25731

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Amharic, Arabic

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: NPF
Provider ID: 25731
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

ODA, THAGHAR

License Type: NPF
Provider ID: 78906
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

License Type: NPF
Provider ID: 78906
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

License Type: NPF
Provider ID: 78906
Provider Gender: Female
License Number: RN810863
NPI: 1063835692

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.

C. دليل الرعاية الأولية

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

License Type: NPF
Provider ID: 78906
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

License Type: NPF
Provider ID: 25731
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

ODA, THAGHAR

License Type: NPF
Provider ID: 25731
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

ORPILLA, IMELDA

License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA

License Type: NP

Provider ID: 25517

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.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

ORPILLA, IMELDA

License Type: NP

Provider ID: 112894

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

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

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA

License Type: NP

Provider ID: 112894

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

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

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: NP
 Provider ID: 78906
 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):
 N
☐ Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
 License Type: NP
 Provider ID: 25732
 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):
 N
☐ Accessibility: CONTACT
 PROVIDER
☐ Hours: M-TH
 8:30AM-5:30PM
 F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
 License Type: NP
 Provider ID: 25732
 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):
 N
☐ Accessibility: CONTACT
 PROVIDER
☐ Hours: M-TH
 8:30AM-5:30PM
 F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
 License Type: NP
 Provider ID: 78906
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	OWEN, MICHAEL License Type: NP Provider ID: 25732	 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
CERTIFIED NURSE PRACTITIONER	Provider Gender: Female License Number: NP95001492 NPI: 1073869145	 1501 IMPERIAL AVE SAN DIEGO, CA 92101
OWEN, MICHAEL License Type: NP Provider ID: 25732 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	 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	 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
 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	 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
 Accessibility: CONTACT PROVIDER  Hours: M-TH 8:30AM-5:30PM F 8AM-5PM	CERTIFIED NURSE PRACTITIONER	PADILLA, MICHELE License Type: NP Provider ID: 289863
CERTIFIED NURSE PRACTITIONER	PADILLA, MICHELE License Type: NP Provider ID: 289863 Provider Gender: Female License Number: NP95020636 NPI: 1356083828	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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-5:30PM

CERTIFIED NURSE PRACTITIONER

PATEL, KELLY

License Type: NP

Provider ID: 25608

Provider Gender: Female

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

PATEL, KELLY

License Type: NP

Provider ID: 25608

Provider Gender: Female

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

License Type: NP

Provider ID: 289872

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

License Type: NP

Provider ID: 289868

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

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.

C. دليل الرعاية الأولية

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

License Type: NP

Provider ID: 289868

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

License Type: NP

Provider ID: 289868

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

License Type: NP

Provider ID: 289868

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

License Type: NP

Provider ID: 289872

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

PERRY, KATHERINE

License Type: NP
Provider ID: 289869
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

PERRY, KATHERINE

License Type: NP
Provider ID: 289869
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

License Type: NP
Provider ID: 289881
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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8AM-2PM	PROVIDER  Hours: M-F 8AM-5PM SA 8AM-2PM	PRACTITIONER QUINTO, CINDY License Type: NP Provider ID: 289872 Provider Gender: Female License Number: NP16433 NPI: 1902810377
CERTIFIED NURSE PRACTITIONER QUINTO, CINDY License Type: NP Provider ID: 289881 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	CERTIFIED NURSE PRACTITIONER QUINTO, CINDY License Type: NP Provider ID: 289872 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	 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
N  Accessibility: CONTACT	CERTIFIED NURSE	CERTIFIED NURSE PRACTITIONER REID, EMILY License Type: NP Provider ID: 46039 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: 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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

REID, EMILY

License Type: NP

Provider ID: 46039

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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

RILEY, JEREN

License Type: NP

Provider ID: 289869

Provider Gender: Male

License Number: NP95012588
NPI: 1932742376

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

RILEY, JEREN

License Type: NP

Provider ID: 289869

Provider Gender: Male

License Number: NP95012588
NPI: 1932742376

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

ROGERS, TANYA

License Type: NP

Provider ID: 100648

Provider Gender: Female

License Number: NP95004443
NPI: 1558710038

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
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

ROGERS, TANYA

License Type: NP
Provider ID: 100648
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

License Type: NP
Provider ID: 289868
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

License Type: NP
Provider ID: 289868
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

License Type: NP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 289872
 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

License Type: NP
 Provider ID: 289868
 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

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 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

License Type: NP
 Provider ID: 289868
 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

License Type: NP
 Provider ID: 289872
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SAMPSON, ANDRIECE

License Type: NP

Provider ID: 289869

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

SAMPSON, ANDRIECE

License Type: NP

Provider ID: 289869

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

License Type: NP

Provider ID: 289868

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

License Type: NP

Provider ID: 289868

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

License Type: NP
 Provider ID: 289868
 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

License Type: NP
 Provider ID: 289868
 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

License Type: NP
 Provider ID: 289872
 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
 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

SANTANGELO, JOANNE

License Type: NP
 Provider ID: 289872
 Provider Gender: Female
 License Number: NP2390

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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

License Type: NP

Provider ID: 289872

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

License Type: NP

Provider ID: 289872

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

License Type: NP

Provider ID: 289868

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE **PRACTITIONER**

SATTERWHITE, MAURINE

License Type: NP
Provider ID: 289868
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

License Type: NP
Provider ID: 289868
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

License Type: NP
Provider ID: 289868
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

License Type: NP
Provider ID: 100421
Provider Gender: Female
License Number: NP7374
NPI: 1730567678
 Provider English Spoken: Y
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.

C. دليل الرعاية الأولية

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

SAVILLE, EDITH

License Type: NP
Provider ID: 100421
Provider Gender: Female
License Number: NP7374
NPI: 1730567678
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

CERTIFIED NURSE PRACTITIONER

SCOTT, KELLY

License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95015026
NPI: 1013420801

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

SCOTT, KELLY

License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95015026
NPI: 1013420801

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

SEBRING, JAN

License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: RN486421
NPI: 1295750339

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
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

License Type: NP

Provider ID: 25731

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): License Number: NP10906
NPI: 1295750339

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

License Type: NP

Provider ID: 25731

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

SEBRING, JAN

License Type: NP

Provider ID: 25731

Provider Gender: Female

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

License Type: NP

Provider ID: 25732

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

515-2424

 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

TAYLOR, KAYLA

License Type: NP

Provider ID: 87122

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

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP

Provider ID: 87122

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

 Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP

Provider ID: 25732

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

TAYLOR, KAYLA

License Type: NP

Provider ID: 25732

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP

Provider ID: 25732

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

License Type: NP

Provider ID: 257948

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

TODD, MIKAYLA

License Type: NP

Provider ID: 257948

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

License Type: NP

Provider ID: 25731

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	Provider Gender: Female License Number: NP2286 NPI: 1598989261	SAN DIEGO  1809 NATIONAL AVE SAN DIEGO, CA 92113
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish	 Phone: (619) 515-2300  After Hours Phone: (619) 515-2300
TRAN, KELLY License Type: NP Provider ID: 25731 Provider Gender: Female	Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO	 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):
N License Number: NP95003689 NPI: 1255799276	 1809 NATIONAL AVE SAN DIEGO, CA 92113	N  Accessibility: CONTACT PROVIDER
 Provider English Spoken: Y  Provider Language(s) Spoken: Vietnamese	 Phone: (619) 515-2300  After Hours Phone: (619) 515-2300	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>
Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO	 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	VEGA, TERESA License Type: NP Provider ID: 25731 Provider Gender: Female
 1809 NATIONAL AVE SAN DIEGO, CA 92113  Phone: (619) 515-2300  After Hours Phone: (619) 515-2300	N  Accessibility: CONTACT PROVIDER	License Number: NP95001705 NPI: 1912304569
 Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish
American Sign Language (ASL): N	TUEROS, VICTORIA License Type: NP Provider ID: 25731 Provider Gender: Female	Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO
 Accessibility: CONTACT PROVIDER	License Number: NP2286 NPI: 1598989261	 1809 NATIONAL AVE SAN DIEGO, CA 92113
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish	 Phone: (619) 515-2300  After Hours Phone: (619) 515-2300
TUEROS, VICTORIA License Type: NP Provider ID: 25731	Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF	 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.

C. دليل الرعاية الأولية

American Sign Language (ASL): Provider ID: 25731

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

License Type: NP

Provider ID: 25731

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

VILLALOBOS, REBECA

License Type: NP

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

VILLALOBOS, REBECA

License Type: NP

Provider ID: 25731

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

License Type: NP

Provider ID: 87122

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA

License Type: NP
Provider ID: 87122
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

License Type: NP
Provider ID: 25608
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

License Type: NP
Provider ID: 39198
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, TAKISHA

License Type: NP
Provider ID: 25608
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Provider ID: 46039

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 39198

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

License Type: NP

Provider ID: 46039

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

 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

WILLIAMS, BREAHA

License Type: NP

Provider ID: 46039

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

 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

License Type: NP

Provider ID: 100421

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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 NURSE PRACTITIONER

WOLF, CELIA

License Type: NP

Provider ID: 100421

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

License Type: CRNM

Provider ID: 25731

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

BOSTON, LAURA

License Type: CRNM

Provider ID: 25731

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

GEPSHTEIN, YANA

License Type: CRNM

Provider ID: 25608

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)

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

515-2444

 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

GEPSHTEIN, YANA

License Type: CRNM

Provider ID: 25608

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

License Type: CRNM

Provider ID: 25731

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 Provider English Spoken: Y

 Provider Language(s)
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

CERTIFIED REGISTERED NURSE MIDWIFE

TOLMIE, SIMONE

License Type: CRNM

Provider ID: 25731

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 Provider English Spoken: Y

 Provider Language(s)
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

License Type: DC

Provider ID: 217520

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 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

CHIROPRACTOR

ASSADIAN, MEHRAK

License Type: DC
Provider ID: 217520
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

CABALLERO, JAMES

License Type: DC
Provider ID: 112894
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
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

CABALLERO, JAMES

License Type: DC
Provider ID: 112894
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
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

CABALLERO, JAMES

License Type: DC
Provider ID: 25517
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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

CABALLERO, JAMES

License Type: DC
 Provider ID: 25517
 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.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

GILIBERTO, JOSEPH

License Type: DC
 Provider ID: 25517
 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

GILIBERTO, JOSEPH

License Type: DC
 Provider ID: 25517
 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
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 Phone: (844) 200-2426
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-4:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

License Type: DC
 Provider ID: 112894
 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
 9995 CARMEL MOUNTAIN RD STE B10

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: DC
 Provider ID: 112894
 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
 9995 CARMEL MOUNTAIN RD STE B10
 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

HALEY, STEVEN

License Type: DC
 Provider ID: 46039
 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

HALEY, STEVEN

License Type: DC
 Provider ID: 46039
 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

License Type: DC
 Provider ID: 46039
 Provider Gender: Male
 License Number: DC29314
 NPI: 1306916994
 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.

C. دليل الرعاية الأولية

 **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
License Type: DC
Provider ID: 46039
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
License Type: DC
Provider ID: 46039
Provider Gender: Female
License Number: DC32800
NPI: 1871046664
 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
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

ILCHENA, ALESANDRA
License Type: DC
Provider ID: 46039
Provider Gender: Female
License Number: DC32800
NPI: 1871046664
 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
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
License Type: DC
Provider ID: 37723

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KAZEM, AHMAD
License Type: DC
Provider ID: 37723
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER
License Type: DC
Provider ID: 112894
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
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

LOVERN, JENNIFER
License Type: DC
Provider ID: 112894
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
SAN DIEGO, CA 92129
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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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CHIROPRACTOR OLSEN, MARTIN License Type: DC Provider ID: 25608 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	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	Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 9AM-5PM
CHIROPRACTOR OLSEN, MARTIN License Type: DC Provider ID: 25608 Provider Gender: Male License Number: DC20729 NPI: 1730247990 ☐ Provider English Spoken: Y ☐ Provider Language(s)	CHIROPRACTOR ROJAS, RICHARD License Type: DC Provider ID: 100421 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	CHIROPRACTOR ROJAS, RICHARD License Type: DC Provider ID: 100421 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 License Type: DC Provider ID: 100421

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: DC

Provider ID: 78906

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

SOSA, DAVID

License Type: DC

Provider ID: 100421

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

License Type: DC

Provider ID: 78906

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

License Type: DC

Provider ID: 100421

Provider Gender: Male

License Number: DC30121

NPI: 1750590600

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi, Persian,
Turkish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

CHIROPRACTOR

TAGHIZADEH, MAJID

License Type: DC
Provider ID: 100421
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):
N

Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

TAGHIZADEH, MAJID

License Type: DC
Provider ID: 78906
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

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

License Type: DC
Provider ID: 78906
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

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

TRUONG, VENNES

License Type: DC
Provider ID: 25517
Provider Gender: Female
License Number: DC34907

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1053919928

 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](http://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

TRUONG, VENNES

License Type: DC

Provider ID: 25517

Provider Gender: Female

License Number: DC34907

NPI: 1053919928

 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](http://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

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 112894

NPI: 1699216622

 Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN
RD STE B10

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://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

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 112894

NPI: 1699216622

 Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN
RD STE B10

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://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

DERMATOLOGY

BURROWS, WILLIAM

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: G16236

NPI: 1639199292

 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.

C. دليل الرعاية الأولية

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

DERMATOLOGY

BURROWS, WILLIAM

License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G16236
NPI: 1639199292

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
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

DERMATOLOGY

CARTER, NATASHA

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A140912
NPI: 1033539184

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
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

DERMATOLOGY

CARTER, NATASHA

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A140912
NPI: 1033539184

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

METABOLISM DIABETES

AHMAD, AAKIF

License Type: DO

Provider ID: 25731

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

AHMAD, AAKIF

License Type: DO

Provider ID: 25731

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

CHANG, AMY

License Type: MD

Provider ID: 25731

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

CHANG, AMY

License Type: MD

Provider ID: 25731

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

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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

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN

License Type: MD
Provider ID: 100421
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

HOSEIN, NADEEN

License Type: MD
Provider ID: 100421
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

License Type: MD
Provider ID: 78906

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

ISLAM, JULIE

License Type: MD
Provider ID: 78906
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

License Type: MD
Provider ID: 25731
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**

LEVINE, MATTHEW

License Type: MD
Provider ID: 25731
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

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 Phone: (619) 515-2300
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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

ENDOCRINOLOGY **METABOLISM DIABETES**

LORENZO, PATRICIA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A129599
NPI: 1487913315
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
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**

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

LORENZO, PATRICIA

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A129599

NPI: 1487913315

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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

NPI: 1609838994

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN

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

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM

F 8:30AM-5PM

SA 8:30AM-5PM

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN

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

 Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM

F 8:30AM-5PM

SA 8:30AM-5PM

ENDOCRINOLOGY

METABOLISM DIABETES

MCCALLUM, JAMES

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A55708

ENDOCRINOLOGY

METABOLISM DIABETES

MCCALLUM, JAMES

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A55708

NPI: 1609838994

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A146838

NPI: 1720474141

 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.

C. دليل الرعاية الأولية

 **Provider Language(s)**
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: 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

NAGELBERG, JODI

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A146838
NPI: 1720474141
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: 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

PHILIS-TSIMIKAS, ATHENA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A50477
NPI: 1922105964

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Modern Greek
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, 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

 Hours: M-F 9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A50477
NPI: 1922105964

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Modern Greek
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, 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.

C. دليل الرعاية الأولية

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

FAMILY PRACTICE

ABDALLAH, ALI

License Type: DO
Provider ID: 78906
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

ABDALLAH, ALI

License Type: DO
Provider ID: 78906
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

License Type: MD
Provider ID: 37723

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

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
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

ALVAREZ-ESTRADA, MIGUEL

License Type: MD
Provider ID: 37723

Provider Gender: Male

License Number: A157505
NPI: 1588197826

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.

C. دليل الرعاية الأولية

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: 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

BACHARACH, REBECCA

License Type: DO

Provider ID: 100421

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

BACHARACH, REBECCA

License Type: DO

Provider ID: 100421

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

BAHRAMZI, MARIA

License Type: MD

Provider ID: 25732

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

License Type: MD

Provider ID: 100648

Provider Gender: Female

License Number: A173486

NPI: 1588141865

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD
 Provider ID: 25732
 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

License Type: MD
 Provider ID: 100648
 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

License Type: MD
 Provider ID: 25732
 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

License Type: MD
 Provider ID: 25732
 Provider Gender: Female
 License Number: A173486
 NPI: 1588141865

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Pashto

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
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 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 25731
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

BAIN, NATALIE

License Type: MD
Provider ID: 25731
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

BISHOP, MELISSA

License Type: MD

Provider ID: 289863
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

BISHOP, MELISSA

License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: C137521
NPI: 1578667077

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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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

License Type: MD

Provider ID: 289856

Provider Gender: Female

License Number: A165398

NPI: 1730684200

Provider English Spoken: Y
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): Provider ID: 289863

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

License Type: MD

Provider ID: 289856

Provider Gender: Female

License Number: A165398

NPI: 1730684200

Provider English Spoken: Y
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

BRADY, PATRICIA

License Type: MD

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

BRADY, PATRICIA

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: C53121

NPI: 1952390437

Provider English Spoken: Y
Cultural Competency: N

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C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: C53623
NPI: 1346337904
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

FAMILY PRACTICE

BRODSKY, MARK

License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: C53623
NPI: 1346337904
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

FAMILY PRACTICE

BROWN, BRANDON

License Type: MD
Provider ID: 25731
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

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C. دليل الرعاية الأولية

BROWN, BRANDON

License Type: MD

Provider ID: 25731

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

License Type: DO

Provider ID: 25732

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

License Type: DO

Provider ID: 25732

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

License Type: DO

Provider ID: 25732

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

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 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F
8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

License Type: DO
Provider ID: 25732
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

License Type: MD
Provider ID: 217520

Provider Gender: Female
License Number: A157488
NPI: 1316479892

 **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

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 **Phone:** (619) 662-4194
 **After Hours Phone:** (619) 662-4194

 **Website:** www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A157488
NPI: 1316479892

 **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

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 **Phone:** (619) 662-4194
 **After Hours Phone:** (619) 662-4194

 **Website:** www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD
Provider ID: 37723
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:** www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL): License Number: 20A14794

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD

Provider ID: 37723

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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

License Type: DO

Provider ID: 25732

Provider Gender: Male

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

License Type: DO

Provider ID: 25732

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

License Type: DO

Provider ID: 100421

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

CHOU, BILL

License Type: DO

Provider ID: 25732

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: DO
Provider ID: 25732
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

License Type: DO
Provider ID: 100421
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

License Type: MD

Provider ID: 25731
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

CHUN, HYUN

License Type: MD
Provider ID: 25731
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

CLARK, DONIA

License Type: MD
Provider ID: 97440
Provider Gender: Female
License Number: A178849
NPI: 1689238560

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

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

FAMILY PRACTICE

CLARK, DONIA

License Type: MD
Provider ID: 97440
Provider Gender: Female
License Number: A178849
NPI: 1689238560

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

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

FAMILY PRACTICE

CORMAN, DANIEL

License Type: DO

Provider ID: 25608

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

CORMAN, DANIEL

License Type: DO
Provider ID: 25608
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: MD
Provider ID: 37723
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: 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

DAPPEN, AMANDA

License Type: MD
Provider ID: 37723
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: 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

DAVIS, DEIRDRE

License Type: MD
Provider ID: 217520
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
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

DAVIS, DEIRDRE

License Type: MD
Provider ID: 217520
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
Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

FAMBRO, CYNTHIA

License Type: MD

Provider ID: 217520

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA

License Type: MD

Provider ID: 217520

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FLORES, JOE

License Type: MD

Provider ID: 100421

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

FLORES, JOE

License Type: MD

Provider ID: 39198

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

 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

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 Hours: M-TH 8AM-5PM

FAMILY PRACTICE

FLORES, JOE

License Type: MD

Provider ID: 39198

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

 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

FAMILY PRACTICE

FLORES, JOE

License Type: MD

Provider ID: 100421

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

GIRGIS, CHERIF

License Type: MD

Provider ID: 312590

Provider Gender: Male

NPI: 1023237260

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, FRESNO HEART
AND SURGICAL HOSPITAL

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 536-8034

 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-6PM

FAMILY PRACTICE

GIRGIS, CHERIF

License Type: MD

Provider ID: 25517

Provider Gender: Male

License Number: A105162

NPI: 1023237260

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, FRESNO HEART
AND SURGICAL HOSPITAL

Board Certified Specialty: No
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

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C. دليل الرعاية الأولية

 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

FAMILY PRACTICE

GIRGIS, CHERIF

License Type: MD
 Provider ID: 25517
 Provider Gender: Male
 License Number: A105162
 NPI: 1023237260
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, French, Spanish
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL 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

FAMILY PRACTICE

GLEASON-ROHRER, GWEN

License Type: MD
 Provider ID: 289881
 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
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\22
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON-ROHRER, GWEN

License Type: MD
 Provider ID: 289882
 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): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON-ROHRER, GWEN

License Type: MD
 Provider ID: 289882

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C. دليل الرعاية الأولية

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):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GLEASON-ROHRER, GWEN

License Type: MD

Provider ID: 289881

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

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GRIFFITHS, KENNETH

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: C52451

NPI: 1760563068

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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

FAMILY PRACTICE

GRIFFITHS, KENNETH

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: C52451

NPI: 1760563068

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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

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F 8AM-5PM

FAMILY PRACTICE

GUTIERREZ, TANIA

License Type: DO

Provider ID: 100648

Provider Gender: Female

License Number: 20A19345

NPI: 1285196311

 Provider English Spoken: Y

 Provider Language(s)
Spoken: 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

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

FAMILY PRACTICE

GUTIERREZ, TANIA

License Type: DO

Provider ID: 100648

Provider Gender: Female

License Number: 20A19345

NPI: 1285196311

 Provider English Spoken: Y

 Provider Language(s)
Spoken: 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

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

FAMILY PRACTICE

HAMILTON, LISA MARIE

License Type: DO

Provider ID: 103499

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

HAMILTON, LISA MARIE

License Type: DO

Provider ID: 78906

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

 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

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C. دليل الرعاية الأولية

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

FAMILY PRACTICE

HAMILTON, LISA MARIE

License Type: DO
Provider ID: 103499
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

HAMILTON, LISA MARIE

License Type: DO
Provider ID: 78906
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

 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

FAMILY PRACTICE

HENDRIX, JEFFERSON

License Type: MD
Provider ID: 307044
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

HENDRIX, JEFFERSON

License Type: MD
Provider ID: 307044
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

JAINCHILL, AMANDA

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 25517
 Provider Gender: Female
 License Number: A141541
 NPI: 1720426901
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY 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
 Hours: M-F 8AM-4:30PM

FAMILY PRACTICE

JAINCHILL, AMANDA

License Type: MD
 Provider ID: 25517
 Provider Gender: Female
 License Number: A141541
 NPI: 1720426901
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MERCY 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
 Hours: M-F 8AM-4:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER

License Type: MD
 Provider ID: 100648
 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

KAUFMAN, JENNIFER

License Type: MD
 Provider ID: 100648
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

License Type: MD

Provider ID: 78906

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

KEFLEZIGHI, BAHGHI

License Type: MD

Provider ID: 78906

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

License Type: MD

Provider ID: 37723

Provider Gender: Male

License Number: A112379

NPI: 1275793929

 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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

License Type: MD

Provider ID: 37723

Provider Gender: Male

License Number: A112379

NPI: 1275793929

 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

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

License Type: MD

Provider ID: 100421

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

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

LACH, REBECCA

License Type: MD

Provider ID: 25732

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
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

License Type: MD

Provider ID: 25732

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
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

License Type: MD

Provider ID: 25732

Provider Gender: Female

License Number: A177922

NPI: 1679137780

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.

C. دليل الرعاية الأولية

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

LACH, REBECCA

License Type: MD
Provider ID: 25732
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
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

License Type: MD
Provider ID: 100421
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

 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

LEE, SANDRINE

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French

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

LEE, SANDRINE

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French

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.

C. دليل الرعاية الأولية

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

LEE, SANDRINE

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French

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

LEE, SANDRINE

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French

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

LINDEMAN, KURTIS

License Type: MD
Provider ID: 289863

Provider Gender: Male

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

LINDEMAN, KURTIS

License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A104052
NPI: 1124155791

 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: 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

LOUGH, MICHELLE

License Type: MD

Provider ID: 78906

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

LOUGH, MICHELLE

License Type: MD

Provider ID: 78906

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

License Type: DO

Provider ID: 103499

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

LU, JULIE

License Type: DO

Provider ID: 103499

Provider Gender: Female

License Number: 20A14804

NPI: 1619210614

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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C. دليل الرعاية الأولية

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

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A161682

NPI: 1841726148

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

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

MANDOYAN, AUSTIN

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A161682

NPI: 1841726148

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

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

License Type: DO

Provider ID: 289868

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

License Type: DO

Provider ID: 289868

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

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

License Type: DO

Provider ID: 289872

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

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

MARSTON, JACQUELINE

License Type: DO

Provider ID: 289868

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

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

License Type: DO

Provider ID: 289868

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

License Type: DO
 Provider ID: 289872
 Provider Gender: Female
 License Number: 20A12402
 NPI: 1417205055
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog, Vietnamese
 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

License Type: MD
 Provider ID: 289868
 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

MATICH, BRANKO

License Type: MD
 Provider ID: 289868
 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

MATICH, BRANKO

License Type: MD
 Provider ID: 289872
 Provider Gender: Male
 License Number: C174985
 NPI: 1023437704
 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

.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

License Type: MD
Provider ID: 289868
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

MATICH, BRANKO

License Type: MD
Provider ID: 289868
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

MATICH, BRANKO

License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: C174985
NPI: 1023437704

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

MCLAUGHLIN, ERIK

License Type: MD
Provider ID: 289869
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 25608

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

Indian Health Services: Y

FAMILY PRACTICE

MCLAUGHLIN, ERIK

License Type: MD

Provider ID: 289869

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

License Type: MD

Provider ID: 25608

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

 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

MELGAR, MONICA

License Type: MD

Provider ID: 25608

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

 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

License Type: MD

Provider ID: 37723

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MORALES, ALEJANDRA

License Type: MD

Provider ID: 37723

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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 307044

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

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 307044

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

License Type: MD

Provider ID: 257948

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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, NGOC

License Type: MD

Provider ID: 257948

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

License Type: MD

Provider ID: 100421

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

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

NGUYEN-CLEARY, THAI

License Type: MD

Provider ID: 100421

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

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

License Type: MD

Provider ID: 25731

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: 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

NIAZI, HARRIS

License Type: MD
Provider ID: 25731
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

License Type: MD
Provider ID: 289863
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

NORRIS, JEFFREY

License Type: MD
Provider ID: 289863
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

License Type: MD
Provider ID: 203755
Provider Gender: Female
License Number: A71544
NPI: 1184773673
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, 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

NUQUI, JOSIE

License Type: MD

Provider ID: 203755

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

PEREZ, PERLITA

License Type: MD

Provider ID: 78906

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

PEREZ, PERLITA

License Type: MD

Provider ID: 78906

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

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A180171

NPI: 1295100691

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.

C. دليل الرعاية الأولية

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

POSADA, SEAN

License Type: MD
Provider ID: 25731

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

License Type: MD
Provider ID: 289863
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
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PROPST, TOBE

License Type: MD

Provider ID: 289863
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
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAGUVEER, VISHAKA

License Type: MD
Provider ID: 112894
Provider Gender: Female
License Number: A172736
NPI: 1740609387

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
OPERATION SAMAHAN

9995 CARMEL MOUNTAIN
RD STE B10
SAN DIEGO, CA 92129

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C. دليل الرعاية الأولية

 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

RAGUVEER, VISHAKA

License Type: MD
 Provider ID: 112894
 Provider Gender: Female
 License Number: A172736
 NPI: 1740609387
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD STE B10
 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

RAGUVEER, VISHAKA

License Type: MD
 Provider ID: 297039
 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
 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

RIDGE, NEAL

License Type: DO
 Provider ID: 307044

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

RIDGE, NEAL

License Type: DO
 Provider ID: 307044
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

FAMILY PRACTICE

RODRIGUEZ, SEAN

License Type: MD

Provider ID: 37723

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: 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

RODRIGUEZ, SEAN

License Type: MD

Provider ID: 37723

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: 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

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 46039

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.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

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 46039

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

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C. دليل الرعاية الأولية

 Phone: (619) 255-9155
Fax: (619) 284-4731

 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

FAMILY PRACTICE

SCOTT, RYLEE

License Type: MD

Provider ID: 25608

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) 515-2444

 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

SCOTT, RYLEE

License Type: MD

Provider ID: 25608

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) 515-2444

 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

SHEIKH, ZARA

License Type: MD

Provider ID: 289881

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

License Type: MD

Provider ID: 289882

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

SHEIKH, ZARA

License Type: MD
 Provider ID: 289881
 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

License Type: MD
 Provider ID: 289882
 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

License Type: DO
 Provider ID: 100648
 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

SHIRAKI, JEAN

License Type: DO
 Provider ID: 100648
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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
 License Type: DO
 Provider ID: 103499
 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): N
 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI
 License Type: DO
 Provider ID: 103499
 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): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES
 License Type: MD
 Provider ID: 35571
 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
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES
 License Type: MD
 Provider ID: 25731
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

515-2300

 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

FAMILY PRACTICE

SMOOT, CHARLES

License Type: MD

Provider ID: 35571

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

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES

License Type: MD

Provider ID: 25731

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

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

FAMILY PRACTICE

SNYDER, CHRISTOPHER

License Type: DO

Provider ID: 257948

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

SNYDER, CHRISTOPHER

License Type: DO

Provider ID: 257948

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 - 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

License Type: MD
Provider ID: 289863
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, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, 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-5:30PM

FAMILY PRACTICE

SOPHY, ELIZABETH

License Type: MD
Provider ID: 289863
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, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, 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-5:30PM

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

License Type: MD
Provider ID: 289856
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

License Type: MD
 Provider ID: 289856
 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

License Type: MD
 Provider ID: 289863
 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

SWARTZ, JOHN

License Type: MD
 Provider ID: 289863
 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

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 25731

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

License Type: MD

Provider ID: 100421

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

 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

THAI, JUSTIN

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 100421

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

 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

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 100648
 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

THOMAS, ZACHARY

License Type: MD
 Provider ID: 100648
 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, UYEN-THAO

License Type: MD
 Provider ID: 25731
 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

TRAN, UYEN-THAO

License Type: MD
 Provider ID: 25731
 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

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PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

License Type: DO

Provider ID: 289882

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, TONNIA

License Type: DO

Provider ID: 289882

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

TRUONG, NHA

License Type: DO

Provider ID: 100421

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) 515-2545

 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

TRUONG, NHA

License Type: DO

Provider ID: 100421

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) 515-2545

 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

TSUCHIYA, KIMIKO

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: DO

Provider ID: 71153

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

TSUCHIYA, KIMIKO

License Type: DO

Provider ID: 71153

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

License Type: MD

Provider ID: 78906

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

VALENZUELA, TRICIA

License Type: MD

Provider ID: 78906

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

WANG, REGINA

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: A109828

NPI: 1154554871

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C. دليل الرعاية الأولية

 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

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

WANG, REGINA

License Type: MD
Provider ID: 289863
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

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

WU, JENNIFER

License Type: MD
Provider ID: 289863
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

WU, JENNIFER

License Type: MD
Provider ID: 289863
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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8:30AM-5PM

FAMILY PRACTICE

ZAHLER, MARVIN

License Type: DO

Provider ID: 100421

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

ZAHLER, MARVIN

License Type: DO

Provider ID: 100421

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

License Type: MD

Provider ID: 37723

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: 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

ZINK, IRENE

License Type: MD

Provider ID: 37723

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: www.syhealth.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-5PM

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 78906

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

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 78906

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: 71153

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

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 71153

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: 100648

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

515-2426
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 IBARRA,

Provider ID: 100648

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: 57714

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 OF SD-
ELM ST,**

Provider ID: 57714

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: 304989

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 HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: 103499

NPI: 1336525906

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
Cultural Competency: N
FAMILY HEALTH CENTERS OF
SAN DIEGO

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org

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: 304989

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):

 Accessibility: CONTACT
PROVIDER

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

FQHC

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

Provider ID: 103499

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

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 HLTH CTR OF SD SAN
DIEGO COMMERCIAL,**

Provider ID: 97440

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 OF SD SAN
DIEGO COMMERCIAL,**

Provider ID: 97440

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

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C. دليل الرعاية الأولية

American Sign Language (ASL): Cultural Competency: N
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 87122

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- CITY COLLEGE,

Provider ID: 87122

NPI: 1356750376

 Provider English Spoken: Y

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: 25608

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

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 25608

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

FQHC

FAMILY HLTH CTR SD

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

HILLCREST,

Provider ID: 100421

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

FQHC

FAMILY HLTH CTR SD

HILLCREST,

Provider ID: 100421

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

FQHC

KING CHAVEZ HEALTH

CENTER,

Provider ID: 217520

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

 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
SA 8AM-12PM

FQHC

KING CHAVEZ HEALTH

CENTER,

Provider ID: 217520

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

 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
SA 8AM-12PM

FQHC

LA MAESTRA COMMUNITY

HEALTH CENTERS - 4074

FAIRMOUNT,

Provider ID: 315861

NPI: 1609849074

 Provider English Spoken: Y
Cultural Competency: N

LA MAESTRA FAMILY CLINIC

 4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 312-0347

Fax: (619) 510-4649

 After Hours Phone: (619)
312-0347

 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.

C. دليل الرعاية الأولية

N  <i>Accessibility: CONTACT PROVIDER</i>	 <i>Phone: (619) 255-9155</i> <i>Fax: (619) 795-9849</i>  <i>After Hours Phone: (619) 255-9155</i>  <i>Website: www.lamaestra.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 8AM-5PM</i>	FQHC LINDA VISTA HEALTH CARE CTR, <i>Provider ID: 289868</i> <i>NPI: 1609905215</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>IHP OF SOUTHERN CAL-PHP</i>  6973 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 279-0925</i> <i>Fax: (858) 633-4680</i>  <i>After Hours Phone: (858) 279-0925</i>  <i>Website: www.sdfamilycare.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>
FQHC LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT, <i>Provider ID: 315861</i> <i>NPI: 1609849074</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> LA MAESTRA FAMILY CLINIC  4074 FAIRMOUNT AVE SAN DIEGO, CA 92105  <i>Phone: (619) 312-0347</i> <i>Fax: (619) 510-4649</i>  <i>After Hours Phone: (619) 312-0347</i>  <i>Website: N/A</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>	FQHC LA MAESTRA FAMILY CLINIC INC, <i>Provider ID: 46039</i> <i>NPI: 1336353721</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> LA MAESTRA FAMILY CLINIC  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105  <i>Phone: (619) 255-9155</i> <i>Fax: (619) 795-9849</i>  <i>After Hours Phone: (619) 255-9155</i>  <i>Website: www.lamaestra.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 8AM-5PM</i>	FQHC LINDA VISTA HEALTH CARE CTR, <i>Provider ID: 289868</i> <i>NPI: 1780665877</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>IHP OF SOUTHERN CAL-PHP</i>  6973 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 279-0925</i> <i>Fax: (858) 633-4680</i>
FQHC LA MAESTRA FAMILY CLINIC INC, <i>Provider ID: 46039</i> <i>NPI: 1336353721</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> LA MAESTRA FAMILY CLINIC  4060 FAIRMOUNT AVE 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.

C. دليل الرعاية الأولية

 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

LINDA VISTA HEALTH CARE CTR,
 Provider ID: 289868
 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

FQHC
LINDA VISTA HEALTH CARE CTR,
 Provider ID: 289868
 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
 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: 25731
 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

LOGAN HEIGHTS FAMILY HEALTH CENTER,
 Provider ID: 298139
 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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 25731
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

**LOGAN HEIGHTS FAMILY
HEALTH CENTER,**
Provider ID: 298139
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

**MID-CITY COMMUNITY
CLINIC,**
Provider ID: 289882
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
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: 289881
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

**MID-CITY COMMUNITY
CLINIC,**
Provider ID: 289882
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
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
 Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 289881
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 CENTER,

Provider ID: 289856
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

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 289856
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: 25732
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

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 39198
NPI: 1700821303

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.

C. دليل الرعاية الأولية

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: 25732
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: 25732
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

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 39198
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: 25732
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 - MIRA MESA,

Provider ID: 203755

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.operationsamahan.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: 25517

NPI: 1871680397

 Provider English Spoken: Y
Cultural Competency: N

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-5PM
SA 8AM-2PM

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 203755

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.operationsamahan.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: 25517

NPI: 1871680397

 Provider English Spoken: Y
Cultural Competency: N

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-5PM
SA 8AM-2PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 112894

NPI: 1699216622

 Provider English Spoken: Y
Cultural Competency: N

OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN
RD STE B10

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 112894

NPI: 1699216622

 Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN
RD STE B10
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: 289869

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 AMERICAN INDIAN HEALTH CENTER,

Provider ID: 289869

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: 289872

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

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

FQHC SAN DIEGO FAMILY CARE, Provider ID: 289872 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	Fax: (619) 232-5922 🕒 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	COMMUNITY HEIGHTS FAMILY MED, Provider ID: 257948 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 CHC - OCEAN VIEW, Provider ID: 37723 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) 232-5922 🕒 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	FQHC SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED, Provider ID: 257948 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: 307044

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

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: 307044

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: 35571

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

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 35571

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

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 289863

NPI: 1659415131

 Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 289863
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

HAI, FAIZI

License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A159324
NPI: 1639523228

 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
 Hours: M-TH 8AM-9PM
F 8AM-5PM

GASTROENTEROLOGY

HAI, FAIZI

License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A159324
NPI: 1639523228

 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
 Hours: M-TH 8AM-9PM
F 8AM-5PM

GASTROENTEROLOGY

OLIVER, DEANNA

License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A139921
NPI: 1750725362

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

AND HEALTHCARE CTR, ST
AGNES MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, ADVENTIST
MEDICAL CENTER, PALOMAR
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY 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](http://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

GASTROENTEROLOGY

OLIVER, DEANNA

License Type: MD

Provider ID: 25517

Provider Gender: Female

License Number: A139921

NPI: 1750725362

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, ST
AGNES MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, ADVENTIST
MEDICAL CENTER, PALOMAR
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY 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](http://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

GASTROENTEROLOGY

STIPHO, SALLY

License Type: MD

Provider ID: 100421

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

GASTROENTEROLOGY

STIPHO, SALLY

License Type: MD

Provider ID: 100421

Provider Gender: Female

License Number: A104647

NPI: 1467642215

Provider English Spoken: Y

Provider Language(s)

Spoken: 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.

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

DOAN STEPHENS, CRYSTAL

License Type: MD
Provider ID: 289881
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

DOAN STEPHENS, CRYSTAL

License Type: MD
Provider ID: 289881
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

HEPATOLOGY

GISH, ROBERT

License Type: MD
Provider ID: 315861
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
 4074 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

HEPATOLOGY

GISH, ROBERT

License Type: MD
Provider ID: 46039
Provider Gender: Male
License Number: G45632
NPI: 1548281322
 *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: 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

HEPATOLOGY

GISH, ROBERT

License Type: MD
Provider ID: 46039
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
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

HEPATOLOGY

GISH, ROBERT

License Type: MD
Provider ID: 315861
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
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619)
312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

HEPATOLOGY

HASSANEIN, TAREK

License Type: MD
Provider ID: 25517
Provider Gender: Male
License Number: A54452
NPI: 1801854450
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, French,
German, Spanish, Urdu
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital,
CHILDRENS HOSPITAL AT
MISSION, SHARP MEMORIAL
HOSPITAL, Sharp Coronado
Hospital Dept of Radiology,
SCRIPPS MERCY HOSPITAL,
ORANGE COAST MEM MED
CTR, ORANGE COAST MEM
MED CTR, JOHN C FREMONT
HOSPITAL, SADDLEBACK
MEMORIAL MED CTR,
PALOMAR MEDICAL CENTER
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

اتصل برعاية عملاء Blue Shield 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

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4:30PM

HEPATOLOGY

HASSANEIN, TAREK

License Type: MD

Provider ID: 25517

Provider Gender: Male

License Number: A54452

NPI: 1801854450

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
German, Spanish, Urdu

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital,

CHILDRENS HOSPITAL AT

MISSION, SHARP MEMORIAL

HOSPITAL, Sharp Coronado

Hospital Dept of Radiology,

SCRIPPS MERCY HOSPITAL,

ORANGE COAST MEM MED

CTR, ORANGE COAST MEM

MED CTR, JOHN C FREMONT

HOSPITAL, SADDLEBACK

MEMORIAL MED CTR,

PALOMAR MEDICAL CENTER

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

INTERNAL MEDICINE

ALASSIL, SALLY

License Type: MD

Provider ID: 97440

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

 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

License Type: MD

Provider ID: 97440

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

 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

License Type: MD

Provider ID: 25731

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD

Provider ID: 25731

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

ALDOUS, JEANNETTE

License Type: MD

Provider ID: 217520

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, PALOMAR

MEDICAL CENTER

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

License Type: MD

Provider ID: 217520

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, PALOMAR

MEDICAL CENTER

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ARGOUD, GEORGES

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 315861
 Provider Gender: Male
 License Number: G61898
 NPI: 1144303538
☐ Provider English Spoken: Y
☐ Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SHARP
 CHULA VISTA MED CTR,
 PARADISE VALLEY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, TRI CITY MEDICAL
 CTR
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4074 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 312-0347
 After Hours Phone: (619)
 312-0347
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

ARGOUD, GEORGES

License Type: MD

Provider ID: 315861
 Provider Gender: Male
 License Number: G61898
 NPI: 1144303538
☐ Provider English Spoken: Y
☐ Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SHARP
 CHULA VISTA MED CTR,
 PARADISE VALLEY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, TRI CITY MEDICAL
 CTR
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4074 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 312-0347
 After Hours Phone: (619)
 312-0347
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

License Type: DO

Provider ID: 25732
 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

BENITEZ, MARTHA

License Type: DO

Provider ID: 25732

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

INTERNAL MEDICINE

BENITEZ, MARTHA

License Type: DO
Provider ID: 25732
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

BENITEZ, MARTHA

License Type: DO
Provider ID: 25732
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

BRIONES-COLMAN, FELICIA

License Type: MD
Provider ID: 100421
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

BRIONES-COLMAN, FELICIA

License Type: MD
Provider ID: 100421
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

CHAN, ANDY

License Type: DO
Provider ID: 100421
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
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

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F 8AM-5PM

INTERNAL MEDICINE

CHAN, ANDY

License Type: DO
Provider ID: 100421
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
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American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV

License Type: MD

Provider ID: 100421

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, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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INTERNAL MEDICINE

CHANDRADAS, SAJIV

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: A122474

NPI: 1720350465

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C. دليل الرعاية الأولية

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 GREEN HOSPITAL, SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 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

License Type: MD
 Provider ID: 100421
 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
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 Website: www.fhcsd.org
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 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

CHEN, JAMES

License Type: MD
 Provider ID: 100421
 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

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 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

CSAPOCZI, PETER

License Type: MD
 Provider ID: 217520
 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
 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 8AM-4PM

INTERNAL MEDICINE

CSAPOCZI, PETER

License Type: MD
Provider ID: 217520
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
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

License Type: MD

Provider ID: 100421

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

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

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License Type: MD

Provider ID: 100421

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

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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

DAHMS, ERIC

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: G80316

NPI: 1306808464

 Provider English Spoken: Y

 Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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C. دليل الرعاية الأولية

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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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

DAHMS, ERIC

License Type: MD
Provider ID: 100421
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

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DIEP, KEVIN

License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
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
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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

DIEP, KEVIN

License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
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American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER
Hours: M-TH 8AM-9PM

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F 8AM-5PM

INTERNAL MEDICINE

DODGE, JOHN

License Type: MD

Provider ID: 100421

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

DODGE, JOHN

License Type: MD

Provider ID: 100421

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

License Type: MD

Provider ID: 100421

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

DOMINGUEZ, FERNANDO

License Type: MD

Provider ID: 100421

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

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 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):

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C. دليل الرعاية الأولية

N  Accessibility: CONTACT PROVIDER  Hours: M-TH 8AM-9PM F 8AM-5PM	N  Accessibility: CONTACT PROVIDER	PROVIDER
INTERNAL MEDICINE	INTERNAL MEDICINE	INTERNAL MEDICINE
EL-GHONEIMY, AHMED License Type: MD Provider ID: 315861 Provider Gender: Male License Number: A93235 NPI: 1942257852  Provider English Spoken: Y  Provider Language(s) Spoken: Arabic, French, Italian Cultural Competency: N Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, NOVATO COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No LA MAESTRA FAMILY CLINIC  4074 FAIRMOUNT AVE SAN DIEGO, CA 92105  Phone: (619) 312-0347  After Hours Phone: (619) 312-0347  Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	EL-GHONEIMY, AHMED License Type: MD Provider ID: 315861 Provider Gender: Male License Number: A93235 NPI: 1942257852  Provider English Spoken: Y  Provider Language(s) Spoken: Arabic, French, Italian Cultural Competency: N Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, NOVATO COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No LA MAESTRA FAMILY CLINIC  4074 FAIRMOUNT AVE SAN DIEGO, CA 92105  Phone: (619) 312-0347  After Hours Phone: (619) 312-0347  Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT	FABELLA, GABRIEL License Type: MD Provider ID: 121666 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 FRENETTE, CATHERINE License Type: MD Provider ID: 100421 Provider Gender: Female License Number: A80461 NPI: 1417935081

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 *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*

INTERNAL MEDICINE

FRENETTE, CATHERINE

License Type: MD
Provider ID: 100421
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

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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*
 *Hours: M-TH 8AM-9PM F 8AM-5PM*

INTERNAL MEDICINE

GEHR, MARC

License Type: MD
Provider ID: 100421
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

GEHR, MARC

License Type: MD
Provider ID: 100421
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*
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 *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

GERWER, JOHANNA

License Type: MD

Provider ID: 25731

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

GERWER, JOHANNA

License Type: MD

Provider ID: 25731

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 DAVILA, ANGELICA

License Type: MD

Provider ID: 289882

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

GUTIERREZ DAVILA, ANGELICA

License Type: MD

Provider ID: 289882

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
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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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

INTERNAL MEDICINE

HAN, PAUL

License Type: MD

Provider ID: 100421

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

 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

HAN, PAUL

License Type: MD

Provider ID: 100421

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
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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

License Type: DO

Provider ID: 71153

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

HAZELBAKER, PAUL

License Type: DO

Provider ID: 71153

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

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C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

HENDERSON, PHILIP

License Type: MD

Provider ID: 100421

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

HENDERSON, PHILIP

License Type: MD

Provider ID: 100421

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

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SAN DIEGO, CA 92103

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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

INTERNAL MEDICINE

HIGGINSON, MICHELLE

License Type: MD

Provider ID: 100421

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):

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

HIGGINSON, MICHELLE

License Type: MD

Provider ID: 100421

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)

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C. دليل الرعاية الأولية

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

License Type: MD
 Provider ID: 100421
 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
 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

JACKSON, GAVIN

License Type: MD
 Provider ID: 100421
 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
 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

License Type: MD
 Provider ID: 100421
 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

JAMISON, KAREN

License Type: MD
 Provider ID: 100421
 Provider Gender: Female
 License Number: A95356
 NPI: 1285830505

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 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
 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

License Type: MD
 Provider ID: 100421
 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

KARCHES, KELLI

License Type: MD
 Provider ID: 100421
 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

License Type: MD
 Provider ID: 46039
 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

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INTERNAL MEDICINE

KHANNA, POORNIMA

License Type: MD

Provider ID: 46039

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

License Type: MD

Provider ID: 289863

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

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

KRIJGER, LISA

License Type: MD

Provider ID: 289863

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

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

License Type: MD

Provider ID: 25732

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

License Type: MD

Provider ID: 25732

Provider Gender: Female

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C. دليل الرعاية الأولية

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):
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 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

License Type: MD

Provider ID: 25732

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

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 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

License Type: MD

Provider ID: 25732

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
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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

LAMANTIA, MICHELE

License Type: MD

Provider ID: 217520

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

License Type: MD

Provider ID: 217520

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: 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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

License Type: MD

Provider ID: 289868

Provider Gender: Male

License Number: A119010

NPI: 1609095264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, 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

License Type: MD

Provider ID: 289868

Provider Gender: Male

License Number: A119010

NPI: 1609095264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, 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

License Type: MD

Provider ID: 289872

Provider Gender: Male

License Number: A119010

NPI: 1609095264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, 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

NARANJO, RODRIGO

License Type: MD

Provider ID: 289868

Provider Gender: Male

License Number: A119010

NPI: 1609095264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, 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.

C. دليل الرعاية الأولية

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

License Type: MD

Provider ID: 289872

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, 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

NARANJO, RODRIGO

License Type: MD

Provider ID: 289868

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, 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

NARAYANAN, MEENA

License Type: MD

Provider ID: 78906

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No
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

NARAYANAN, MEENA

License Type: MD

Provider ID: 78906

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y
Provider Language(s)
Spoken: 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.

C. دليل الرعاية الأولية

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

License Type: DO
Provider ID: 78906
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
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED 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

INTERNAL MEDICINE

PARIKH, MILIND

License Type: DO
Provider ID: 78906
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
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED 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

INTERNAL MEDICINE

RAMERS, CHRISTIAN

License Type: MD
Provider ID: 100421
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
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.

INTERNAL MEDICINE

RAMERS, CHRISTIAN

License Type: MD

Provider ID: 100421

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
PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

License Type: MD

Provider ID: 100421

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

RESNIKOFF, PAMELA

License Type: MD

Provider ID: 100421

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

License Type: MD

Provider ID: 78906

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

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): License Type: MD

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA

License Type: MD

Provider ID: 78906

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: 46039

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.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

INTERNAL MEDICINE

ROUEL, WADI

License Type: MD

Provider ID: 46039

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.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

INTERNAL MEDICINE

SASSIC, JESSICA

License Type: MD

Provider ID: 100421

Provider Gender: Female

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C. دليل الرعاية الأولية

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

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

INTERNAL MEDICINE

SASSIC, JESSICA

License Type: MD

Provider ID: 100421

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

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**

License Type: MD

Provider ID: 307044

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, TRI CITY

MEDICAL 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

INTERNAL MEDICINE

**SHAMSINEJAD BABAKI,
ARASH**

License Type: MD

Provider ID: 307044

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, TRI CITY

MEDICAL 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

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INTERNAL MEDICINE

SHI, RUJING

License Type: DO

Provider ID: 100421

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

SHI, RUJING

License Type: DO

Provider ID: 100421

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

TESSIER, ADLA

License Type: MD

Provider ID: 315861

Provider Gender: Female

License Number: A51666

NPI: 1013915594

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

TESSIER, ADLA

License Type: MD

Provider ID: 315861

Provider Gender: Female

License Number: A51666

NPI: 1013915594

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 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.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): License Type: MD

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: C55724

NPI: 1689010324

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

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): License Type: MD

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 25731

Provider Gender: Female

License Number: C55724

NPI: 1689010324

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

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

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

License Type: MD

Provider ID: 25517

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, ADVENTIST

HEALTH SIERRA VISTA,

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.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

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

License Type: MD

Provider ID: 25517

Provider Gender: Female

License Number: A156854

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

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C. دليل الرعاية الأولية

Cultural Competency: N
Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, ADVENTIST
HEALTH SIERRA VISTA,
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.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

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

License Type: MD
Provider ID: 100421
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

VIDAURRAZAGA, MONICA

License Type: MD
Provider ID: 100421
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
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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

License Type: MD
Provider ID: 289863
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

WASTILA, LISA

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 289863
 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

License Type: MD
 Provider ID: 289868
 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

WATTANAMANO, PORNTHEP

License Type: MD
 Provider ID: 289868
 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

WATTANAMANO, PORNTHEP

License Type: MD
 Provider ID: 289868
 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)
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 .org
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 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

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INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

License Type: MD

Provider ID: 289868

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

License Type: MD

Provider ID: 217520

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WATTS, ELI

License Type: MD

Provider ID: 217520

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

YUNG, STEVEN

License Type: MD

Provider ID: 100421

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-TH 8AM-9PM
 F 8AM-5PM

INTERNAL MEDICINE

YUNG, STEVEN

License Type: MD
 Provider ID: 100421
 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

MOUSSAVIAN, MEHRAN

License Type: DO
 Provider ID: 78906
 Provider Gender: Male
 License Number: 20A7241
 NPI: 1689788234

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, 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
 Hours: M-F
 8:30AM-5:30PM

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO
 Provider ID: 78906
 Provider Gender: Male
 License Number: 20A7241
 NPI: 1689788234
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, Sharp Grossmont Hospital

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C. دليل الرعاية الأولية

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

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,

Provider ID: 205571

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

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,

Provider ID: 87130

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

NEUROLOGY

CANTU-REYNA, GUILLERMO

License Type: MD

Provider ID: 46039

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.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

License Type: MD

Provider ID: 46039

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

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C. دليل الرعاية الأولية

 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	 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	 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
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NEUROLOGY	NEUROLOGY	NEUROLOGY
LUHAR, RIYA License Type: DO Provider ID: 100421 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	LUHAR, RIYA License Type: DO Provider ID: 100421 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	MARTIN, FREDERIC License Type: MD Provider ID: 100421 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

MARTIN, FREDERIC

License Type: MD

Provider ID: 100421

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

 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

License Type: MD

Provider ID: 100421

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

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

NEUROLOGY

TAFRESHI, GILDA

License Type: MD

Provider ID: 100421

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

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

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OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER

License Type: MD

Provider ID: 46039

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

AL-MSHHDANI, AYSER

License Type: MD

Provider ID: 46039

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

BLAKE, GARY

License Type: MD

Provider ID: 289868

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

License Type: MD

Provider ID: 289868

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

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C. دليل الرعاية الأولية

 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

License Type: MD
 Provider ID: 289868
 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

License Type: MD
 Provider ID: 289868
 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

License Type: MD
 Provider ID: 25732
 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.fhcscd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
 Provider ID: 25731

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25732

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

License Type: MD

Provider ID: 39198

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

License Type: MD

Provider ID: 78906

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

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.

C. دليل الرعاية الأولية

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) 515-2560
 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

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25732

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

License Type: MD

Provider ID: 78906

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) 515-2560
 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

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25608

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
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

License Type: MD

Provider ID: 25608

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

License Type: MD

Provider ID: 25731

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

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25732

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD

Provider ID: 39198

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): **CARTER, KHALIL**

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 39198

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

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

License Type: MD

Provider ID: 25732

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

 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

CARTER, KHALIL

License Type: MD

Provider ID: 25731

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD
 Provider ID: 25608
 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

License Type: MD
 Provider ID: 78906
 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) 515-2560
 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

CARTER, KHALIL

License Type: MD
 Provider ID: 25732
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CITY MEDICAL CTR

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

CARTER, KHALIL

License Type: MD
Provider ID: 78906
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) 515-2560
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

CARTER, KHALIL

License Type: MD
Provider ID: 25732
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
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

CARTER, KHALIL

License Type: MD
Provider ID: 39198
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 25732

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

 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

CARTER, KHALIL

License Type: MD

Provider ID: 25608

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

CHAKRABARTI, PRIYA

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

License Type: MD
 Provider ID: 25731
 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
 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

CHAKRABARTI, PRIYA

License Type: MD
 Provider ID: 39198
 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

License Type: MD
 Provider ID: 78906
 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

License Type: MD
 Provider ID: 78906
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD
Provider ID: 25608
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

License Type: MD
Provider ID: 25608
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

License Type: MD
Provider ID: 25731
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
 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

CHAKRABARTI, PRIYA

License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A163464

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

NPI: 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): NPI: 1629277322

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD

Provider ID: 39198

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

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 25608

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

DE MIK, TRAVIS

License Type: MD

Provider ID: 78906

Provider Gender: Male

License Number: A108228

NPI: 1629277322

 Provider English Spoken: Y
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

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

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 78906
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

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

License Type: MD
Provider ID: 25608
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

License Type: MD
Provider ID: 25731
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

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	Provider ID: 39198 Provider Gender: Female License Number: A178499 NPI: 1033613732	Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
<u>OBSTETRICS / GYNECOLOGY</u>	 Provider English Spoken: Y	Board Certified Specialty: No
DORUELO, ASHLEY	 Provider Language(s) Spoken: Spanish	FAMILY HEALTH CENTERS OF
License Type: MD	Cultural Competency: N	SAN DIEGO
Provider ID: 25731	Hospital Affiliation: SCRIPPS	 4725 MARKET ST
Provider Gender: Female	MERCY HOSPITAL, Sharp	SAN DIEGO, CA 92102
License Number: A178499	Grossmont Hospital	 Phone: (619) 515-2560
NPI: 1033613732	Board Certified Specialty: No	 After Hours Phone: (619) 515-2560
 Provider English Spoken: Y	FAMILY HEALTH CENTERS OF	 Website: www.fhcsd.org
 Provider Language(s) Spoken: Spanish	SAN DIEGO	Medi-Cal Open Panel: Yes
Cultural Competency: N	 3514 30TH ST	Min/Max Age: 0\None
Hospital Affiliation: SCRIPPS	SAN DIEGO, CA 92104	American Sign Language (ASL):
MERCY HOSPITAL, Sharp	 Phone: (619) 515-2424	N
Grossmont Hospital	 After Hours Phone: (619) 515-2424	 Accessibility: CONTACT PROVIDER
Board Certified Specialty: No	 Website: www.fhcsd.org	<u>OBSTETRICS / GYNECOLOGY</u>
FAMILY HEALTH CENTERS OF	Medi-Cal Open Panel: Yes	DORUELO, ASHLEY
SAN DIEGO	Min/Max Age: 0\18	License Type: MD
 1809 NATIONAL AVE	American Sign Language (ASL):	Provider ID: 25608
SAN DIEGO, CA 92113	N	Provider Gender: Female
 Phone: (619) 515-2300	 Accessibility: CONTACT PROVIDER	License Number: A178499
 After Hours Phone: (619) 515-2300	<u>OBSTETRICS / GYNECOLOGY</u>	NPI: 1033613732
 Website: www.fhcsd.org	DORUELO, ASHLEY	 Provider English Spoken: Y
Medi-Cal Open Panel: Yes	License Type: MD	 Provider Language(s) Spoken: Spanish
Min/Max Age: 0\None	Provider ID: 78906	Cultural Competency: N
American Sign Language (ASL):	Provider Gender: Female	Hospital Affiliation: SCRIPPS
N	License Number: A178499	MERCY HOSPITAL, Sharp
 Accessibility: CONTACT PROVIDER	NPI: 1033613732	Grossmont Hospital
<u>OBSTETRICS / GYNECOLOGY</u>	 Provider English Spoken: Y	Board Certified Specialty: No
DORUELO, ASHLEY	 Provider Language(s) Spoken: Spanish	FAMILY HEALTH CENTERS OF
License Type: MD		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.

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

License Type: MD

Provider ID: 25608

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

 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

License Type: MD

Provider ID: 78906

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

License Type: MD

Provider ID: 25731

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD

Provider ID: 39198

Provider Gender: Female

License Number: A178499

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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

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

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

License Type: MD

Provider ID: 25731

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

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: C159737

NPI: 1326243833

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French,
Portuguese, Spanish

Cultural Competency: N

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 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.

C. دليل الرعاية الأولية

*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

License Type: MD
Provider ID: 39198
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

License Type: MD
Provider ID: 25731
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

License Type: MD
Provider ID: 25608
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
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-W
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.

C. دليل الرعاية الأولية

TH 9AM-6PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD
Provider ID: 78906
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

License Type: MD
Provider ID: 39198

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

License Type: MD
Provider ID: 25608
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
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

HANLEY, LAUREN

License Type: MD
Provider ID: 78906
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

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C. دليل الرعاية الأولية

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

LIPSCHITZ, LISA

License Type: MD
Provider ID: 78906
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
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PROVIDER
Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 25732
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
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515-2424
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PROVIDER
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OBSTETRICS / GYNECOLOGY

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Spoken: Spanish
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GROSSMONT HOSPITAL
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C. دليل الرعاية الأولية

 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

LIPSCHITZ, LISA

License Type: MD

Provider ID: 25608

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

License Type: MD

Provider ID: 25731

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

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 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

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 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD

Provider ID: 39198

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

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C. دليل الرعاية الأولية

License Type: MD
 Provider ID: 25732
 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
 License Type: MD
 Provider ID: 25732

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
 License Type: MD
 Provider ID: 25732
 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
 License Type: MD
 Provider ID: 25732
 Provider Gender: Female
 License Number: A72005
 NPI: 1649208711

☐ 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.

C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 39198
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

License Type: MD
Provider ID: 25608
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

PHAN, TIFFANI

License Type: MD

Provider ID: 25517

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

License Type: MD
Provider ID: 25517
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.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD
Provider ID: 25731
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

License Type: MD
Provider ID: 39198
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

License Type: MD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 39198
 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
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 Phone: (619) 515-2424
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OBSTETRICS / GYNECOLOGY

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 Hospital Affiliation: 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-W
 8:30AM-5:30PM
 TH 9AM-6PM
 F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD
 Provider ID: 78906
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 25608

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

 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
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OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 78906

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

License Type: DO

Provider ID: 78906

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

 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

License Type: DO

Provider ID: 25608

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

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SAN DIEGO, CA 92109
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OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO
 Provider ID: 39198
 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): Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198

 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO
 Provider ID: 78906
 Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198
 Provider English Spoken: Y
 Cultural Competency: N
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 Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

 4725 MARKET ST
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 Phone: (619) 515-2560
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American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

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OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO
 Provider ID: 25731
 Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp

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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

License Type: DO
Provider ID: 39198
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

License Type: DO
Provider ID: 25731
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

TRUJILLO, JENNIFER

License Type: DO

Provider ID: 217520

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Board Certified Specialty: No
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

License Type: DO

Provider ID: 217520

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

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.

C. دليل الرعاية الأولية

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
950 S EUCLID AVE
SAN DIEGO, CA 92114
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

ZIEG, ALAN

License Type: MD
Provider ID: 25732
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

License Type: MD
Provider ID: 39198
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

License Type: MD
Provider ID: 25732
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 39198

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

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After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

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C. دليل الرعاية الأولية

American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD

Provider ID: 25732

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):  Accessibility: CONTACT PROVIDER

N

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD

Provider ID: 25608

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)
515-2444

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

N

 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

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Min/Max Age: 0\None

American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

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OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

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C. دليل الرعاية الأولية

License Type: MD
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 Provider Gender: Male
 License Number: G78814
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☐ Provider English Spoken: Y
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 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SHARP CORONADO HOSP
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 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
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OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

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 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):
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 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

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 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
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 Website: www.fhcsd.org
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 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

OPHTHALMOLOGY

NAJAFI, DAVID

License Type: MD
 Provider ID: 25731
 Provider Gender: Male
 License Number: A68124
 NPI: 1396715991
☐ 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.

C. دليل الرعاية الأولية

 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

NAJAFI, DAVID

License Type: MD
 Provider ID: 25731
 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

License Type: MD
 Provider ID: 25731
 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
 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

License Type: MD
 Provider ID: 25731
 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

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 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 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

License Type: MD
Provider ID: 78906

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

SHAW, BLAKE

License Type: MD

Provider ID: 78906

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

License Type: MD

Provider ID: 289863

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

OPHTHALMOLOGY

ZABLIT, KARIM

License Type: MD

Provider ID: 289863

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

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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

MILLS, MORGAN

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A181809
NPI: 1891359154
 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

MILLS, MORGAN

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A181809
NPI: 1891359154
 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

YOUSEF, ANDREW

License Type: MD
Provider ID: 25731
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

OTOLARYNGOLOGY

YOUSEF, ANDREW

License Type: MD
Provider ID: 25731
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

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 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 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

PEDIATRICS

ABELL, GEOFFREY

License Type: MD

Provider ID: 204570

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

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

ABRAMSON, RACHEL

License Type: MD

Provider ID: 46039

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

ABRAMSON, RACHEL

License Type: MD

Provider ID: 46039

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

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PEDIATRICS

ADJAN, ROULA

License Type: MD

Provider ID: 46039

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

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

ADJAN, ROULA

License Type: MD

Provider ID: 46039

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

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

License Type: MD

Provider ID: 204574

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

License Type: MD

Provider ID: 78906

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

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 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

ALBINO, NICHOLAS

License Type: MD

Provider ID: 39198

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

ALBINO, NICHOLAS

License Type: MD

Provider ID: 78906

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

 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

PEDIATRICS

ALBINO, NICHOLAS

License Type: MD

Provider ID: 39198

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

License Type: MD

Provider ID: 289881

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 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.

C. دليل الرعاية الأولية

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

PEDIATRICS

ANDREE, GREGOR

License Type: MD
Provider ID: 289872
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

.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

ANDREE, GREGOR

License Type: MD
Provider ID: 289881
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

PROVIDER

PEDIATRICS

ANDREE, GREGOR

License Type: MD
Provider ID: 289872
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

License Type: MD
Provider ID: 204446
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: 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, 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

AWDYKOVYCH, MARTA

License Type: MD

Provider ID: 25731

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

AWDYKOVYCH, MARTA

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 87122

Provider Gender: Female

License Number: A128091

NPI: 1013278704

-  Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

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

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

AYSON, NICOLE

License Type: MD

Provider ID: 87122

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

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 8AM-5PM

PEDIATRICS

AZIMI, AYSUN

License Type: DO

Provider ID: 205178

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

CABARLO, JEHRIB

License Type: DO

Provider ID: 25731

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): License Type: MD

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB

License Type: DO

Provider ID: 25731

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

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CARSON, STEPHEN

Provider ID: 204346

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
SA 8AM-2PM

PEDIATRICS

CASTELNOVI, CLAUDIA

License Type: MD

Provider ID: 46039

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

CASTELNOVI, CLAUDIA

License Type: MD

Provider ID: 46039

Provider Gender: Female

License Number: A111170

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD

Provider ID: 296844

Provider Gender: Female

NPI: 1932660966

 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\18

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

CHEN, JENNIFER

License Type: MD

Provider ID: 78906

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

 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

CHEN, JENNIFER

License Type: MD

Provider ID: 78906

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

 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

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 46039
 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

CONE, STEPHANIE

License Type: MD
 Provider ID: 46039
 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

License Type: DO
 Provider ID: 25731
 Provider Gender: Male
 License Number: 20A15743
 NPI: 1174942544

☐ Provider English Spoken: Y
☐ Provider Language(s)
 Spoken: Spanish

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

CORDES, WILLIAM

License Type: DO
 Provider ID: 25731
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: MD
Provider ID: 289872
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

DIXON, SARAH

License Type: MD
Provider ID: 289872
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

License Type: MD
Provider ID: 276247
Provider Gender: Female
NPI: 1740249432
Provider English Spoken: Y
Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
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\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 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

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

FORTUNE, ERIN

License Type: MD
 Provider ID: 25731
 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

License Type: MD
 Provider ID: 39198
 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

FORTUNE, ERIN

License Type: MD
 Provider ID: 25731
 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

License Type: MD
 Provider ID: 39198
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

License Type: MD
Provider ID: 204676
Provider Gender: Female
NPI: 1144297961

Provider English Spoken: Y
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

GOGGIN, SAMANTHA

License Type: MD
Provider ID: 46039
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

GOGGIN, SAMANTHA

License Type: MD
Provider ID: 46039
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

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A151631
NPI: 1508210311

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD 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

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

GRAY, SARAH

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A151631
NPI: 1508210311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, 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
Hours: M 8:30AM-7PM
TU-TH 8:30AM-6PM
F 8:30AM-5:30PM
SA 8:30AM-5PM

PEDIATRICS

GUPTA, VARSHA

License Type: MD
Provider ID: 25731
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

GUPTA, VARSHA

License Type: MD
Provider ID: 25731
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

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

HENDERSON, TREVOR

License Type: MD
 Provider ID: 204586
 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, UC SAN DIEGO
 HEALTH - EAST CAMPUS
 MEDICAL CENTER
 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

HIBBS, NICOLE

License Type: MD
 Provider ID: 204509
 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-8:30PM
 F 8AM-5PM
 SA 8AM-2PM

PEDIATRICS

HORMOZDYARAN, SANAYA

License Type: MD

Provider ID: 296313

Provider Gender: Female

NPI: 1750887634

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 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

License Type: MD

Provider ID: 204510

Provider Gender: Female

NPI: 1275762833

Provider English Spoken: Y
 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.

C. دليل الرعاية الأولية

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SHARP
MEMORIAL HOSPITAL
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
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

JUAREZ, PATRICIA

License Type: MD
Provider ID: 204696
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):

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

KARMAKAR, KANKA

License Type: MD
Provider ID: 25517
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

KARMAKAR, KANKA

License Type: MD
Provider ID: 25517
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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

PEDIATRICS

KESANAPALLI, DEEPTHI

License Type: MD
 Provider ID: 294427
 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
 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\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:30AM-6PM
 F 8:30AM-12PM

PEDIATRICS

LAWRIE, ALISA

License Type: MD
 Provider ID: 305240
 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\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

PEDIATRICS

LE, NGUYEN

License Type: MD
 Provider ID: 204363
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 9AM-5PM

PEDIATRICS

LOPER, KAREN

License Type: MD

Provider ID: 258121

Provider Gender: Female

NPI: 1619908936

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, SCRIPPS MERCY

HOSPITAL

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

License Type: MD

Provider ID: 25731

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

LUJAN, ARLEEN

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 205018

Provider Gender: Male

NPI: 1811968837

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
Spanish

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.

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

License Type: MD

Provider ID: 289872

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

MAHENDRAN, SRIVIDYA

License Type: MD

Provider ID: 289872

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**

License Type: MD

Provider ID: 46039

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM
SA 8AM-2PM

PEDIATRICS

MANRIQUEZ-CASTILLO,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

ERENDIRA

License Type: MD

Provider ID: 46039

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.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

MARTINEZ-ANDREE, INGRID

License Type: MD

Provider ID: 204379

Provider Gender: Female

NPI: 1205807203

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
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

NGUYEN, JANICE

License Type: MD

Provider ID: 39198

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

NGUYEN, JANICE

License Type: MD

Provider ID: 39198

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

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C. دليل الرعاية الأولية

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-5PM

PEDIATRICS

PARK, TARI

License Type: MD

Provider ID: 206277

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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

PAVLOVICH, WENDY

License Type: MD

Provider ID: 39198

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

PAVLOVICH, WENDY

License Type: MD

Provider ID: 39198

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

License Type: MD

Provider ID: 204607

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

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

NETWORK

 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

License Type: MD

Provider ID: 289863

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

PRESKILL, CATALINA

License Type: MD

Provider ID: 289863

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

License Type: MD

Provider ID: 315861

Provider Gender: Male

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

 4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

License Type: MD

Provider ID: 46039

Provider Gender: Male

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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, JAVIER

License Type: MD
 Provider ID: 315861
 Provider Gender: Male
 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
 4074 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

License Type: MD
 Provider ID: 46039
 Provider Gender: Male
 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

RUBENSTEIN, STUART

License Type: MD
 Provider ID: 276967
 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-12PM

PEDIATRICS

SAMPATH, SRIVIDYA

License Type: MD
 Provider ID: 39198
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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-F 8:30AM-5:30PM

PEDIATRICS

SAMPATH, SRIVIDYA

License Type: MD
Provider ID: 39198
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

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-F 8:30AM-5:30PM

PEDIATRICS

SEBSO, JODI

License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A103099
NPI: 1538484316

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
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

SEBSO, JODI

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A103099
NPI: 1538484316

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
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

SEBSO, JODI

License Type: MD
Provider ID: 39198

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: A103099
NPI: 1538484316
☐ 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
📍 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

SEBSO, JODI

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A103099
NPI: 1538484316
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL
Board Certified Specialty: No
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

SHENOY, ASHVIN

License Type: MD
Provider ID: 206334
Provider Gender: Male
NPI: 1619262664
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
MEMORIAL 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\18
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

PEDIATRICS

SHETH, HASMUKH

License Type: MD
Provider ID: 217520
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SHETH, HASMUKH

License Type: MD

Provider ID: 217520

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SHIAU, NANCY

License Type: MD

Provider ID: 206325

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

License Type: MD

Provider ID: 25608

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

SPITZER, MARSHA

License Type: MD

Provider ID: 87122

Provider Gender: Female

License Number: A76785

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 87122

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA

License Type: MD

Provider ID: 25608

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

SUBRAMANIAN, RAMA

License Type: MD

Provider ID: 304383

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-12PM

PEDIATRICS

SULEIMAN-QAFITI, KHAWLA

License Type: MD

Provider ID: 39198

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

SULEIMAN-QAFITI, KHAWLA

License Type: MD

Provider ID: 39198

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
Hours: M-TH 8AM-5PM

PEDIATRICS

TAMAYO, MAITHE

License Type: MD
Provider ID: 35571
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

License Type: MD
Provider ID: 25731
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

TAMAYO, MAITHE

License Type: MD
Provider ID: 35571
Provider Gender: Female
License Number: A80504
NPI: 1487748430

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N
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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

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

TAMAYO, MAITHE

License Type: MD

Provider ID: 25731

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

License Type: MD

Provider ID: 312057

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

 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

WATERS, ELIZABETH

License Type: MD

Provider ID: 205058

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):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

WEATHERLY, JACOB

License Type: MD

Provider ID: 300981

Provider Gender: Male

NPI: 1538520457

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LUCILE

SALTER PACKARD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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-12PM

PEDIATRICS

WONG, IAN

License Type: DO

Provider ID: 310731

Provider Gender: Male

NPI: 1174152128

Provider English Spoken: Y
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

Fax: (858) 793-1035

After Hours Phone: (858)
793-1011

Website: N/A

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-12PM

PEDIATRICS

WONG, YOLANDA

License Type: MD

Provider ID: 289872

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

WONG, YOLANDA

License Type: MD

Provider ID: 289872

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

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C. دليل الرعاية الأولية

 **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

License Type: MD
Provider ID: 289872
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

License Type: MD
Provider ID: 289872
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

License Type: MD
Provider ID: 289881
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

ZAHEER, AARON

License Type: MD
Provider ID: 289881
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

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C. دليل الرعاية الأولية

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

PHYSICIANS ASSISTANT

ALVARADO, EDMUND

License Type: PA
Provider ID: 97440
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

ALVARADO, EDMUND

License Type: PA
Provider ID: 97440
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

License Type: PA
Provider ID: 46039
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

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

ARMENTA, JORGE

License Type: PA
Provider ID: 46039
Provider Gender: Male
License Number: PA13694
NPI: 1346382611

 Provider English Spoken: Y
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.

C. دليل الرعاية الأولية

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

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

License Type: PA
Provider ID: 25732
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

License Type: PA
Provider ID: 25732
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

License Type: PA
Provider ID: 25732
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

License Type: PA
Provider ID: 25732
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

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C. دليل الرعاية الأولية

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA

License Type: PA

Provider ID: 289863

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

CONTRERAS, LORETTA

License Type: PA

Provider ID: 289863

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

License Type: PA

Provider ID: 25731

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

DAVID, MARVIC

License Type: PA

Provider ID: 25731

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

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C. دليل الرعاية الأولية

 Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

DRAME, SALWA

License Type: PA

Provider ID: 100648

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

DRAME, SALWA

License Type: PA

Provider ID: 100648

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

License Type: PA

Provider ID: 25608

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

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

FINK, PATRICK

License Type: PA

Provider ID: 25608

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

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
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.

TH 9AM-6PM
F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

GARCIA, DEANA

License Type: PA
Provider ID: 39198
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

GARCIA, DEANA

License Type: PA
Provider ID: 39198
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

HIGUERA, EDITH

License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA51283
NPI: 1558782029
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, UCI HEALTH-LOS
ALAMITOS

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

PHYSICIANS ASSISTANT

HIGUERA, EDITH

License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA51283
NPI: 1558782029
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, UCI HEALTH-LOS
ALAMITOS
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

License Type: PA
Provider ID: 103499
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, KRYSTA

License Type: PA
Provider ID: 78906
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

HOXMEIER, KRYSTA

License Type: PA
Provider ID: 103499
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, KRYSTA

License Type: PA
Provider ID: 78906
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

LAPINA, LORI

License Type: PA

Provider ID: 25732

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

License Type: PA

Provider ID: 25732

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

License Type: PA

Provider ID: 100421

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

License Type: PA

Provider ID: 25732

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

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

LAPINA, LORI

License Type: PA

Provider ID: 25732

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

License Type: PA

Provider ID: 100421

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

LLOYD, MATTHEW

License Type: PA

Provider ID: 71153

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

 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

LLOYD, MATTHEW

License Type: PA

Provider ID: 87122

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

LLOYD, MATTHEW

License Type: PA

Provider ID: 71153

Provider Gender: Male

License Number: PA62752

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

NPI: 1487307369

 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

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

License Type: PA

Provider ID: 87122

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

LOPEZ, MARIO

License Type: PA

Provider ID: 100648

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

LOPEZ, MARIO

License Type: PA

Provider ID: 100648

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

LOPEZ, MARIO

License Type: PA

Provider ID: 100421

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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
 License Type: PA
 Provider ID: 100421
 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

MARTINEZ-MURGUIA, IRENE
 License Type: PA
 Provider ID: 46039
 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

MARTINEZ-MURGUIA, IRENE
 License Type: PA
 Provider ID: 46039
 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
 License Type: PA
 Provider ID: 46039
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): License Type: PA

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

PHYSICIANS ASSISTANT

MERCER, KELLY

License Type: PA

Provider ID: 46039

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):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

PHYSICIANS ASSISTANT

MILLER, LAUREL

License Type: PA

Provider ID: 78906

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

MILLER, LAUREL

License Type: PA

Provider ID: 78906

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

License Type: PA

Provider ID: 25731

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	<i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i>	 <i>Website: www.sdfamilycare.org</i>
NUNO, JOSE	 6973 LINDA VISTA RD	<i>Medi-Cal Open Panel: Yes</i>
<i>License Type: PA</i>	SAN DIEGO, CA 92111	<i>Min/Max Age: 0\None</i>
<i>Provider ID: 25731</i>	 <i>Phone: (858) 279-0925</i>	<i>American Sign Language (ASL):</i>
<i>Provider Gender: Male</i>	 <i>After Hours Phone: (858)</i>	<i>N</i>
<i>License Number: PA15227</i>	279-0925	 <i>Accessibility: CONTACT</i>
<i>NPI: 1275543068</i>	 <i>Website: www.sdfamilycare.org</i>	<i>PROVIDER</i>
 <i>Provider English Spoken: Y</i>	<i>Medi-Cal Open Panel: Yes</i>	 <i>Hours: M 8AM-5PM</i>
<i>Cultural Competency: N</i>	<i>Min/Max Age: 0\None</i>	<i>TU 8AM-8PM</i>
<i>Board Certified Specialty: No</i>	<i>American Sign Language (ASL):</i>	<i>W-F 8AM-5PM</i>
<i>FAMILY HEALTH CENTERS OF</i>	<i>N</i>	<i>SA 9AM-1PM</i>
<i>SAN DIEGO</i>	 <i>Accessibility: CONTACT</i>	PHYSICIANS ASSISTANT
 1809 NATIONAL AVE	<i>PROVIDER</i>	PHUNG, AIVI
SAN DIEGO, CA 92113	 <i>Hours: M 8AM-5PM</i>	<i>License Type: PA</i>
 <i>Phone: (619) 515-2300</i>	<i>TU 8AM-8PM</i>	<i>Provider ID: 289868</i>
 <i>After Hours Phone: (619)</i>	<i>W-F 8AM-5PM</i>	<i>Provider Gender: Female</i>
515-2300	<i>SA 9AM-1PM</i>	<i>License Number: PA53902</i>
 <i>Website: www.fhcsd.org</i>	PHYSICIANS ASSISTANT	<i>NPI: 1639528110</i>
<i>Medi-Cal Open Panel: Yes</i>	PHUNG, AIVI	 <i>Provider English Spoken: Y</i>
<i>Min/Max Age: 0\None</i>	<i>License Type: PA</i>	 <i>Provider Language(s)</i>
<i>American Sign Language (ASL):</i>	<i>Provider ID: 289868</i>	<i>Spoken: Vietnamese</i>
<i>N</i>	<i>Provider Gender: Female</i>	<i>Cultural Competency: N</i>
 <i>Accessibility: CONTACT</i>	<i>License Number: PA53902</i>	<i>Board Certified Specialty: No</i>
<i>PROVIDER</i>	<i>NPI: 1639528110</i>	<i>IHP OF SOUTHERN CAL-PHP</i>
PHYSICIANS ASSISTANT	 <i>Provider English Spoken: Y</i>	 6973 LINDA VISTA RD
PHUNG, AIVI	 <i>Provider Language(s)</i>	SAN DIEGO, CA 92111
<i>License Type: PA</i>	<i>Spoken: Vietnamese</i>	 <i>Phone: (858) 279-0925</i>
<i>Provider ID: 289868</i>	<i>Cultural Competency: N</i>	 <i>After Hours Phone: (858)</i>
<i>Provider Gender: Female</i>	<i>Board Certified Specialty: No</i>	279-0925
<i>License Number: PA53902</i>	<i>IHP OF SOUTHERN CAL-PHP</i>	 <i>Website: www.sdfamilycare.org</i>
<i>NPI: 1639528110</i>	 6973 LINDA VISTA RD	<i>Medi-Cal Open Panel: Yes</i>
 <i>Provider English Spoken: Y</i>	SAN DIEGO, CA 92111	<i>Min/Max Age: 0\None</i>
 <i>Provider Language(s)</i>	 <i>Phone: (858) 279-0925</i>	<i>American Sign Language (ASL):</i>
<i>Spoken: Vietnamese</i>	 <i>After Hours Phone: (858)</i>	<i>N</i>
<i>Cultural Competency: N</i>	279-0925	 <i>Accessibility: CONTACT</i>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Hours: M 8AM-5PM
 TU 8AM-8PM
 W-F 8AM-5PM
 SA 9AM-1PM

PHYSICIANS ASSISTANT

PHUNG, AIVI

License Type: PA
 Provider ID: 289868
 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

POLLEY, SHANNON

License Type: PA
 Provider ID: 78906
 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

POLLEY, SHANNON

License Type: PA
 Provider ID: 78906
 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

License Type: PA
 Provider ID: 25731
 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

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C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

License Type: PA

Provider ID: 25731

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

License Type: PA

Provider ID: 37723

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

License Type: PA

Provider ID: 37723

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

License Type: PA

Provider ID: 87122

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 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

RASMUSSEN, DALE

License Type: PA

Provider ID: 87122

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: PA54022
NPI: 1962880864
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY
HOSPITAL OF FOLSOM
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

SCHELLIE, SCOTT

License Type: PA
Provider ID: 87122
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

SCHELLIE, SCOTT

License Type: PA
Provider ID: 87122
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

TOMASZEWSKI, DEBRA

License Type: PA
Provider ID: 78906
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
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA
Provider ID: 78906
Provider Gender: Female
License Number: MT2061555
NPI: 1215264452

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C. دليل الرعاية الأولية

 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

License Type: PA

Provider ID: 78906

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
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA

Provider ID: 78906

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

TREUNER, JULIE

License Type: PA

Provider ID: 25731

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

TREUNER, JULIE

License Type: PA

Provider ID: 25731

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

License Type: PA
 Provider ID: 25731
 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

TURNER, SHEREENA

License Type: PA
 Provider ID: 25731
 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

License Type: PA
 Provider ID: 112894
 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
 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

PHYSICIANS ASSISTANT

UDOH, EKAETE

License Type: PA
 Provider ID: 112894
 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
 SAN DIEGO, CA 92129
 Phone: (844) 200-2426

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.

C. دليل الرعاية الأولية

 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

PHYSICIANS ASSISTANT

VARGAS, ROBERT

License Type: PA
 Provider ID: 25731
 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

VARGAS, ROBERT

License Type: PA
 Provider ID: 25731
 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

License Type: PA
 Provider ID: 289882

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): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

License Type: PA
 Provider ID: 289882
 Provider Gender: Female
 License Number: PA18746
 NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, 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.

C. دليل الرعاية الأولية

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

PODIATRIST

JUAREZ, LETICIA

License Type: DPM
Provider ID: 25731
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

JUAREZ, LETICIA

License Type: DPM
Provider ID: 25731
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

License Type: DPM

Provider ID: 25731
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,
Foothill Regional Medical
Center
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

License Type: DPM
Provider ID: 87122
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 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.

C. دليل الرعاية الأولية

Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
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

LE, DIANA

License Type: DPM
Provider ID: 78906
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,

Foothill Regional Medical Center
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

LE, DIANA

License Type: DPM
Provider ID: 78906
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, Foothill Regional Medical Center
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

LE, DIANA

License Type: DPM
Provider ID: 87122
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, Foothill Regional Medical Center
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
8:30AM-5:30PM

PODIATRIST

LE, DIANA

License Type: DPM
Provider ID: 25731
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,
Foothill Regional Medical
Center
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

MANCHEL, BRUCE

License Type: DPM
Provider ID: 307044
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

MANCHEL, BRUCE

License Type: DPM
Provider ID: 307044
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

PANEK, JOHN

License Type: DPM

Provider ID: 25517

Provider Gender: Male

License Number: DPM6016

NPI: 1295795599

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE
235

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

PODIATRIST

PANEK, JOHN
 License Type: DPM
 Provider ID: 25517
 Provider Gender: Male
 License Number: DPM6016
 NPI: 1295795599
 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
 Hours: M-F 8AM-4:30PM

PODIATRIST

SCHNEIDER, SARAH
 License Type: DPM
 Provider ID: 25608
 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

PODIATRIST

SCHNEIDER, SARAH
 License Type: DPM
 Provider ID: 25608
 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

PODIATRIST

SCHNEIDER, SARAH
 License Type: DPM
 Provider ID: 25731
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	NPI: 1326282237  Provider English Spoken: Y Cultural Competency: N	515-2300  Website: www.fhcsd.org Medi-Cal Open Panel: Yes
PODIATRIST		
SCHNEIDER, SARAH License Type: DPM Provider ID: 87122 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  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	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	Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
PODIATRIST		
SCHNEIDER, SARAH License Type: DPM Provider ID: 87122 Provider Gender: Female License Number: DPM4819	PODIATRIST SCHNEIDER, SARAH License Type: DPM Provider ID: 25731 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)	PREVENTATIVE MEDICINE GENERAL HILL, LINDA License Type: MD Provider ID: 289868 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Hours: M-F
 8:30AM-5:30PM
 SA 9AM-4PM

PREVENTATIVE MEDICINE **GENERAL**

HILL, LINDA
 License Type: MD
 Provider ID: 289868
 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
 License Type: MD
 Provider ID: 289872
 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

License Type: MD
 Provider ID: 289868
 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
 License Type: MD
 Provider ID: 289872
 Provider Gender: Female
 License Number: G41532

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

License Type: MD

Provider ID: 289868

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

ROMERO, CAMILA

License Type: MD

Provider ID: 289868

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

UCSD MEDICAL CTR

Board Certified Specialty: No
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):

 Accessibility: CONTACT
PROVIDER

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA

License Type: MD

Provider ID: 289868

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
UCSD MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA 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.

C. دليل الرعاية الأولية

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

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

License Type: MD
 Provider ID: 289868
 Provider Gender: Female
 License Number: A93812
 NPI: 1508912130
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
 Board Certified Specialty: No 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

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

License Type: MD
 Provider ID: 289868
 Provider Gender: Female
 License Number: A93812
 NPI: 1508912130
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
 Board Certified Specialty: No 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

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT

License Type: PT
 Provider ID: 25731
 Provider Gender: Female
 License Number: PT30272
 NPI: 1457689309
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hebrew
 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

REGISTERED PHYSICAL THERAPIST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

BLOCKER, NIRIT

License Type: PT

Provider ID: 25731

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew

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

REGISTERED PHYSICAL THERAPIST

CAMERON, IAN

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT291088

NPI: 1275993560

 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

CAMERON, IAN

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT291088

NPI: 1275993560

 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

CUMMINGS, GEORGE

License Type: PT

Provider ID: 100421

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CUMMINGS, GEORGE

License Type: PT

Provider ID: 100421

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

FIELDING, JOSEPH

License Type: PT

Provider ID: 100421

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

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH

License Type: PT

Provider ID: 100421

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

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

HERMES, MARY

License Type: PT

Provider ID: 25731

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

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C. دليل الرعاية الأولية

PROVIDER

REGISTERED PHYSICAL THERAPIST

HERMES, MARY

License Type: PT

Provider ID: 25731

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
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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

REGISTERED PHYSICAL THERAPIST

LEE, RYANT

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT296601

NPI: 1659922177

 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

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

REGISTERED PHYSICAL THERAPIST

LEE, RYANT

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT296601

NPI: 1659922177

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

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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

MIGNEA, DAVID

License Type: PT

Provider ID: 100421

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

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C. دليل الرعاية الأولية

 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-TH 8AM-9PM
F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

License Type: PT
Provider ID: 100421
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

SALES, JAN ERIC

License Type: PT

Provider ID: 100421
Provider Gender: Female
License Number: PT303890
NPI: 1417650169

 **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

SALES, JAN ERIC

License Type: PT
Provider ID: 100421
Provider Gender: Female
License Number: PT303890
NPI: 1417650169

 **Provider English Spoken:** Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE
SAN DIEGO, CA 92103
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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
 **Hours:** M-TH 8AM-9PM
F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

License Type: PT
Provider ID: 100421
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

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C. دليل الرعاية الأولية

American Sign Language (ASL): Provider ID: 25731

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

License Type: PT

Provider ID: 100421

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

TOVAR, NICOLE

License Type: PT

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

TOVAR, NICOLE

License Type: PT

Provider ID: 25731

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

VAN DYKE, JASON

License Type: PT

Provider ID: 100421

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

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C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON

License Type: PT
 Provider ID: 100421
 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

REDDY, DANA

License Type: MD

Provider ID: 78906
 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

License Type: MD
 Provider ID: 78906

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):

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

RHEUMATOLOGY

REDDY, DANA

License Type: MD
 Provider ID: 289863
 Provider Gender: Female

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C. دليل الرعاية الأولية

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

RHEUMATOLOGY

REDDY, DANA

License Type: MD

Provider ID: 289863

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

License Type: SP

Provider ID: 25731

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

MILLER, WILLIAM

License Type: SP

Provider ID: 25731

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
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C. دليل الرعاية الأولية

 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

License Type: SP

Provider ID: 25731

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
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

License Type: SP

Provider ID: 25731

Provider Gender: Female

License Number: SP27677

NPI: 1932680006

 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

SAN MARCOS

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

License Type: NP

Provider ID: 289853

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 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

CERTIFIED NURSE

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CERTIFIED NURSE

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA

License Type: NPF

Provider ID: 289853

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
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Provider Gender: Female
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NPI: 1538319645
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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IHP OF SOUTHERN CAL-PHP

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C. دليل الرعاية الأولية

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

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American Sign Language (ASL):

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Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

License Type: NP

Provider ID: 289853

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

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
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C. دليل الرعاية الأولية

 **Provider Language(s)**
 Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 150 VALPRED RD
 SAN MARCOS, CA 92069
 **Phone:** (760) 736-6767
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 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
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License Number: NP20893
NPI: 1811262405
 **Provider English Spoken:** Y
 **Provider Language(s)**
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Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
Board Certified Specialty: No
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American Sign Language (ASL):

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C. دليل الرعاية الأولية

N  Accessibility: CONTACT PROVIDER	 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
<u>CERTIFIED NURSE PRACTITIONER</u>	 150 VALPRED RD SAN MARCOS, CA 92069	<u>CERTIFIED NURSE PRACTITIONER</u>
MACIAS, ALISSA License Type: NP Provider ID: 289853 Provider Gender: Female License Number: NP21368 NPI: 1952658445  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	 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	MACIAS, ALISSA License Type: NP Provider ID: 289853 Provider Gender: Female License Number: NP21368 NPI: 1952658445  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
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NPI: 1952658445

 Provider English Spoken: Y
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Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

License Type: CRNM

Provider ID: 289853

Provider Gender: Female

License Number: NM235844
NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Board Certified Specialty: No
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 Hours: M-F 8AM-5PM
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Provider Gender: Female
License Number: NM235844
NPI: 1407287469
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Cultural Competency: N
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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 8AM-5PM

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

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

 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

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

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
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 Phone: (760) 736-6767

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

Provider Gender: Male

License Number: C54157

NPI: 1275630618

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 Provider Language(s)
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Cultural Competency: N

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Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): License Number: C54157

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

Provider Gender: Male

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 Provider Language(s)
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

TRUECARE,

Provider ID: 289853

NPI: 1245246917

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

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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

FQHC

TRUECARE,

Provider ID: 296545

NPI: 1245246917

 Provider English Spoken: Y

Cultural Competency: N

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 Accessibility: CONTACT PROVIDER

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FQHC

TRUECARE,

Provider ID: 289853

NPI: 1245246917

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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PROVIDER
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FQHC

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Provider ID: 296545
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 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: 289853
NPI: 1598484255
 Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
 150 VALPREDA 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
 Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: 296545
NPI: 1598484255
 Provider English Spoken: Y
Cultural Competency: N
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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: 289853
NPI: 1811617939
 Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
 150 VALPREDA RD
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
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PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: 296545
NPI: 1811617939
 Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP

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 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

FQHC

TRUECARE,
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NPI: 1598484255
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Cultural Competency: N
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PROVIDER
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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

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A71311
NPI: 1184735201

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Polish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 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

GENERAL PRACTICE

WITCZAK, IZABELA

License Type: MD
 Provider ID: 289853
 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

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 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
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 Accessibility: CONTACT
 PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

License Type: MD
 Provider ID: 289853
 Provider Gender: Female
 License Number: A71311
 NPI: 1184735201

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Polish
 Cultural Competency: N
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 MEMORIAL HOSPITAL
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 Board Certified Specialty: No
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GENERAL PRACTICE

WITCZAK, IZABELA

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C. دليل الرعاية الأولية

License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A71311
NPI: 1184735201

 Provider English Spoken: Y
 Provider Language(s)
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Hospital Affiliation: SCRIPPS
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Board Certified Specialty: No
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Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD
Provider ID: 289853
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

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American Sign Language (ASL):
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INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD

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C. دليل الرعاية الأولية

Provider ID: 289853

Provider Gender: Male

License Number: G74757

NPI: 1467485078

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☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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American Sign Language (ASL):

N

☐ Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: A97181

NPI: 1154477628

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

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C. دليل الرعاية الأولية

Hospital Affiliation: PALOMAR
MEDICAL CENTER, TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

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

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

License Type: MD

Provider ID: 289853

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Provider Language(s)
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Cultural Competency: N

Hospital Affiliation: PALOMAR
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MEDICAL CTR

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Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, TRI CITY
MEDICAL CTR

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

License Type: MD

Provider ID: 289853

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, TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

150 VALPRED RD

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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

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OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

License Type: MD

Provider ID: 289853

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, TRI CITY

MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD

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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
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OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

License Type: MD

Provider ID: 289853

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, TRI CITY

MEDICAL CTR

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 8AM-5PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

License Type: MD

Provider ID: 289853

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

License Type: MD

Provider ID: 289853

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

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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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

License Type: MD

Provider ID: 289853

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 VALPREDIA 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

License Type: MD

Provider ID: 289853

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 VALPREDIA 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

License Type: MD

Provider ID: 289853

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

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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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: A93248

NPI: 1174703680

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

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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

License Type: MD

Provider ID: 303889

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\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM

PEDIATRICS

MALHOTRA, ARATI

License Type: MD

Provider ID: 289853

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

License Type: MD

Provider ID: 289853

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

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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

PEDIATRICS

MALHOTRA, ARATI

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: A63903

NPI: 1215135306

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C. دليل الرعاية الأولية

 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 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

PEDIATRICS

MALHOTRA, ARATI

License Type: MD

Provider ID: 289853

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 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

PEDIATRICS

MALHOTRA, ARATI

License Type: MD

Provider ID: 289853

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 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

PEDIATRICS

MALHOTRA, ARATI

License Type: MD

Provider ID: 289853

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 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

PEDIATRICS

MONAHAN, CAROLYN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Type: MD
 Provider ID: 238093
 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

License Type: MD
 Provider ID: 304036
 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 VALPRED 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\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM

PEDIATRICS

POSADAS, EMERITO

License Type: MD
 Provider ID: 289853
 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 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

License Type: MD
 Provider ID: 303872
 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 RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767

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C. دليل الرعاية الأولية

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM

PEDIATRICS

POSADAS, EMERITO

License Type: MD
Provider ID: 289853
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 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

License Type: MD
Provider ID: 289853
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 RD
SAN MARCOS, CA 92069
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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

PEDIATRICS

POSADAS, EMERITO

License Type: MD
Provider ID: 289853
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
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American Sign Language (ASL): N
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PEDIATRICS

POSADAS, EMERITO

License Type: MD
Provider ID: 289853
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

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C. دليل الرعاية الأولية

IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD
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 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

License Type: MD
Provider ID: 289853
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

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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

PEDIATRICS

QUINTERO, CAROLYN

License Type: MD
Provider ID: 303854
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 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-6PM
SA 8AM-5PM

PEDIATRICS

SEBIANE, MARIA

License Type: MD

Provider ID: 289853

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 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

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)

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C. دليل الرعاية الأولية

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 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

License Type: MD
Provider ID: 289853
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

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Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
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PEDIATRICS

SEBIANE, MARIA

License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s)
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Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
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C. دليل الرعاية الأولية

PEDIATRICS

SEBIANE, MARIA

License Type: MD

Provider ID: 289853

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
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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

PEDIATRICS

SOCHA, TRACI

License Type: DO

Provider ID: 224843

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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-4:45PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

License Type: PA

Provider ID: 289853

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

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Min/Max Age: 0\None

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N

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Provider Gender: Male

License Number: PA22667

NPI: 1174964001

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Cultural Competency: N

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PHYSICIANS ASSISTANT

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

License Type: PA

Provider ID: 289853

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: PA17101

NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

License Type: PA

Provider ID: 289853

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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PHYSICIANS ASSISTANT

KOSEL, MATTHEW

License Type: PA

Provider ID: 289853

Provider Gender: Male

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PHYSICIANS ASSISTANT

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License Type: PA

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PHYSICIANS ASSISTANT

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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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	 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	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 KOSEL, MATTHEW License Type: PA Provider ID: 289853 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 NAVARRETE CELESTINO, MISHEL License Type: PA Provider ID: 289853 Provider Gender: Female License Number: PA62228 NPI: 1578263760  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	PHYSICIANS ASSISTANT NAVARRETE CELESTINO, MISHEL License Type: PA Provider ID: 289853 Provider Gender: Female License Number: PA62228 NPI: 1578263760  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 NAVARRETE CELESTINO, MISHEL License Type: PA Provider ID: 289853 Provider Gender: Female License Number: PA62228 NPI: 1578263760  Provider English Spoken: Y	PHYSICIANS ASSISTANT NAVARRETE CELESTINO, MISHEL License Type: PA Provider ID: 289853 Provider Gender: Female License Number: PA62228 NPI: 1578263760  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	PHYSICIANS ASSISTANT NAVARRETE CELESTINO, MISHEL License Type: PA Provider ID: 289853 Provider Gender: Female License Number: PA62228 NPI: 1578263760  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

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C. دليل الرعاية الأولية

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

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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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

 Hours: M-F 8AM-5PM
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PHYSICIANS ASSISTANT

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License Type: PA
Provider ID: 289853

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Spoken: Spanish

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 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
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PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

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Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

RUSSO, KRISTA

License Type: PA
Provider ID: 289853
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 VALPRED RD
SAN MARCOS, CA 92069
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 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
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PHYSICIANS ASSISTANT

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PHYSICIANS ASSISTANT

RUSSO, KRISTA
License Type: PA

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C. دليل الرعاية الأولية

Provider ID: 289853

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 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

SPENCE, JAMIE

License Type: PA

Provider ID: 289853

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 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):
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 Accessibility: CONTACT
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PHYSICIANS ASSISTANT

SPENCE, JAMIE

License Type: PA

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Spoken: Spanish

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

PHYSICIANS ASSISTANT

SPENCE, JAMIE

License Type: PA

Provider ID: 289853

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 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

PHYSICIANS ASSISTANT

SPENCE, JAMIE

License Type: PA

Provider ID: 289853

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

 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.

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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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):

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Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

License Type: PA

Provider ID: 289853

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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American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

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License Type: PA

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Cultural Competency: N

Board Certified Specialty: No
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After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

License Type: PA

Provider ID: 289853

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

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

License Type: PA

Provider ID: 289853

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

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-5PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

License Type: PA
 Provider ID: 289853
 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
 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

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License Type: PA
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 License Number: PA51867
 NPI: 1295147387
 Provider English Spoken: Y
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 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
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PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

License Type: PA
 Provider ID: 289853
 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
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767

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C. دليل الرعاية الأولية

 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

License Type: DPM
 Provider ID: 296545
 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

License Type: DPM
 Provider ID: 296545
 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

License Type: DPM
 Provider ID: 296545
 Provider Gender: Male
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 COMMUNITY HOSPITAL,
 COMMUNITY REGIONAL
 MEDICAL CENTER-FRESNO,
 FRESNO HEART AND
 SURGICAL HOSPITAL
 Board Certified Specialty: No
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 1595 GRAND AVE STE 106
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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

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PODIATRIST DASGUPTA, DEBORSHI License Type: DPM Provider ID: 296545 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	License Type: DPM Provider ID: 296545 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	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	PODIATRIST DASGUPTA, DEBORSHI License Type: DPM Provider ID: 296545 Provider Gender: Male	SAN YSIDRO CARDIOVASCULAR DISEASE PONCE, SONIA License Type: MD Provider ID: 247960 Provider Gender: Female License Number: A145008

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1164659033

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

PONCE, SONIA

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A145008

NPI: 1164659033

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

**CHAUSSE CASTRO,
EKATERINA**

License Type: NP

Provider ID: 247760

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

 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

**CHAUSSE CASTRO,
EKATERINA**

License Type: NP

Provider ID: 247760

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
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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

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C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA

License Type: NP
Provider ID: 247960
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA

License Type: NP
Provider ID: 247960
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

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 Phone: (619) 662-4100
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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

GUADARRAMA, IGNACIO

License Type: NP
Provider ID: 247760
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO

License Type: NP
Provider ID: 247760
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

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

License Type: NP

Provider ID: 247960

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

License Type: NP

Provider ID: 247960

Provider Gender: Male

License Number: NP95003024

NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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SAN YSIDRO, 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

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

License Type: NP

Provider ID: 247960

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

 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-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

License Type: NP

Provider ID: 247960

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

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 Phone: (619) 662-4100

 After Hours Phone: (619)
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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS

License Type: NP
Provider ID: 247960
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
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

KANTAS, PARIS

License Type: NP
Provider ID: 247960
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
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA

License Type: NP
Provider ID: 247760
Provider Gender: Female

License Number: NP95017732
NPI: 1326599002

 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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA

License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002

 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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662-4100
 Website: www.syhealth.org

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C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1548614506

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA

License Type: NP

Provider ID: 247760

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

 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

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA

License Type: NP

Provider ID: 247760

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

 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

VAZQUEZ-ERLBECK, MARTHA

License Type: NP

Provider ID: 247760

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

 3364 BEYER BLVD
SAN YSIDRO, 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

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

License Type: NP

Provider ID: 247760

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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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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C. دليل الرعاية الأولية

CHIROPRACTOR

OCHOA, RAUL

License Type: DC

Provider ID: 247960

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)
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Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OCHOA, RAUL

License Type: DC

Provider ID: 247960

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

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Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

License Type: MD

Provider ID: 247960

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
SAN YSIDRO, CA 92173

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

License Type: MD

Provider ID: 247960

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

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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

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C. دليل الرعاية الأولية

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 47414

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: www.syhealth.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

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 247960

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

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 247960

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

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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

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 47414

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

ARRIETA, NOEMI

License Type: DO

Provider ID: 247960

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

 4004 BEYER BLVD
SAN YSIDRO, 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

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ARRIETA, NOEMI

License Type: DO

Provider ID: 247960

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

 4004 BEYER BLVD
SAN YSIDRO, 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

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

BORSAN, COSMIN

License Type: DO

Provider ID: 247960

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

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

BORSAN, COSMIN

License Type: DO

Provider ID: 247960

Provider Gender: Male

License Number: 20A17643

NPI: 1679060255

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Romanian

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
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

License Type: MD
Provider ID: 47414
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

License Type: MD
Provider ID: 47414
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD
Provider ID: 247960
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD
Provider ID: 247960

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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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE

License Type: MD

Provider ID: 247960

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

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

CASTILLO, STEPHANIE

License Type: MD

Provider ID: 247960

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
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 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-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

CORONADO, MYRNA

License Type: MD

Provider ID: 247960

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

License Type: MD

Provider ID: 47414

Provider Gender: Female

License Number: A112627

NPI: 1710147566

 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
4050 BEYER BLVD
SAN YSIDRO, 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

CORONADO, MYRNA

License Type: MD
Provider ID: 47414
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: 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

License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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SAN YSIDRO, 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

DALUGDUGAN, ESTHER

License Type: MD
Provider ID: 247960
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DALUGDUGAN, ESTHER

License Type: MD
Provider ID: 247960
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

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C. دليل الرعاية الأولية

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☎ Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DAVIS, CHARLES

License Type: MD
Provider ID: 247960
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
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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
SA 8:30AM-2PM

FAMILY PRACTICE

DAVIS, CHARLES

License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G41219
NPI: 1194840231
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ESTRADA, JOHANNA

License Type: MD
Provider ID: 247960
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
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License Type: MD
Provider ID: 247960
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

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C. دليل الرعاية الأولية

VISTA, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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SAN YSIDRO, CA 92173
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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-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

KAUFHOLD, ANNE

License Type: MD

Provider ID: 247960

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

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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

FAMILY PRACTICE

LEPEZ, DAVID

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A130348

NPI: 1205196029

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

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Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEPEZ, DAVID

License Type: MD

Provider ID: 247960

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: A130348
 NPI: 1205196029
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

MOYA, MARY

License Type: MD
 Provider ID: 247960
 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
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 PROVIDER

FAMILY PRACTICE

MOYA, MARY

License Type: MD
 Provider ID: 247960
 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
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 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

NIKZAD, JASON

License Type: DO
 Provider ID: 247960
 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
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C. دليل الرعاية الأولية

PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

FAMILY PRACTICE

NIKZAD, JASON

License Type: DO
 Provider ID: 247960
 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
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 662-4100
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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
 SA 8:30AM-2PM

FAMILY PRACTICE

ORTEGA, LUIS

License Type: MD

Provider ID: 247960
 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
 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):
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 Accessibility: CONTACT
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FAMILY PRACTICE

ORTEGA, LUIS

License Type: MD
 Provider ID: 247960
 Provider Gender: Male
 License Number: A180886
 NPI: 1558924936

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 Provider Language(s)
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 Hospital Affiliation: SCRIPPS
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 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

License Type: MD
 Provider ID: 247960
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
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 Accessibility: CONTACT PROVIDER
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FAMILY PRACTICE

RAJAIPOUR, NEGIN

License Type: MD
 Provider ID: 247960
 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
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 Hours: M-F 8AM-5:30PM
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FAMILY PRACTICE

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License Type: MD
 Provider ID: 247760
 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: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

License Type: MD

Provider ID: 247760
 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
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 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROJAS, SARAH

License Type: MD
 Provider ID: 247960
 Provider Gender: Female
 License Number: A139169
 NPI: 1245645076

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

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C. دليل الرعاية الأولية

IHP OF SOUTHERN CAL-PHP

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SAN YSIDRO, CA 92173
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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.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-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ROJAS, SARAH

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A139169

NPI: 1245645076

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
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American Sign Language (ASL):

N

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PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

SHAHTAJI, ALAN

License Type: DO

Provider ID: 247960

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
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Min/Max Age: 0\None

American Sign Language (ASL):
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FAMILY PRACTICE

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License Type: DO

Provider ID: 247960

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089

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MEDICAL CTR, UCSD LA

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THORNTON

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A157772

NPI: 1912438250

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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Min/Max Age: 0\None
American Sign Language (ASL):
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PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA

License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A157772
NPI: 1912438250
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SWEET, PATRICK

License Type: MD
Provider ID: 247960
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
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FAMILY PRACTICE

SWEET, PATRICK

License Type: MD
Provider ID: 247960
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License Number: A101827
NPI: 1457407702
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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
SAN YSIDRO, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

TALavera, GREGORY

License Type: MD

Provider ID: 247960

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

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

TALavera, GREGORY

License Type: MD

Provider ID: 247960

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

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

License Type: MD

Provider ID: 247760

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TAN, LO FU

License Type: MD

Provider ID: 247760

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

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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

UTZ, JACK

License Type: MD

Provider ID: 247960

Provider Gender: Male

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C. دليل الرعاية الأولية

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

SAN YSIDRO, 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

UTZ, JACK

License Type: MD

Provider ID: 247960

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

SAN YSIDRO, 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

FQHC

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR,

Provider ID: 47414

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: 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

MATERNAL AND CHILD

HEALTH CTR,

Provider ID: 47414

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: 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 SAN

YSIDRO HEALTH CENTER,

Provider ID: 247960

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) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.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

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

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 247960

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) 205-6341

 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-8PM
SA 8AM-2PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 247760

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: 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 HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 247760

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: 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

GENERAL PRACTICE

TEJEDA, FRANCISCO

License Type: MD

Provider ID: 247960

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

TEJEDA, FRANCISCO

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A66885

NPI: 1407940075

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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
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 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

GYNECOLOGY

CALDERON, JORGE

License Type: MD
 Provider ID: 247960
 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
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

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 Provider ID: 247960
 Provider Gender: Male
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 NPI: 1407800881
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 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, LOMPOC VALLEY
 MEDICAL CENTER
 Board Certified Specialty: No
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 SAN YSIDRO, CA 92173
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 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

INFECTIOUS DISEASE

PROMER, KATHERINE

License Type: MD
 Provider ID: 247960
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

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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.

C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

INFECTIOUS DISEASE

PROMER, KATHERINE

License Type: MD
 Provider ID: 247960
 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
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 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-5:30PM

SA 8:30AM-2PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE

License Type: MD
 Provider ID: 247960
 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, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 4004 BEYER BLVD
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 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

License Type: MD
 Provider ID: 247960
 Provider Gender: Female
 License Number: A101017

NPI: 1073650339

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 Provider Language(s)
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 Hospital Affiliation: UCSD
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
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 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

License Type: MD
 Provider ID: 247960
 Provider Gender: Male
 License Number: A49267
 NPI: 1689646572
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MEMORIAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A49267

NPI: 1689646572

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT

License Type: MD

Provider ID: 47414

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

4050 BEYER BLVD
SAN YSIDRO, 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

DILLON, BENEDICT

License Type: MD

Provider ID: 47414

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

4050 BEYER BLVD
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After Hours Phone: (619)
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Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

HURST, MICHAEL

License Type: DO

Provider ID: 247960

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

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

HURST, MICHAEL

License Type: DO

Provider ID: 247960

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

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

License Type: MD

Provider ID: 247760

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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KAUFER, DAVID

License Type: MD

Provider ID: 247760

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: www.syhealth.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	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N	 After Hours Phone: (619) 662-4100  Website: www.syhealth.org
INTERNAL MEDICINE		
LAMANTIA, MICHELE License Type: MD Provider ID: 247960 Provider Gender: Female License Number: G71855 NPI: 1124176102	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	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
 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	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	INTERNAL MEDICINE MAY, LOUIS License Type: MD Provider ID: 247960 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	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	 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
INTERNAL MEDICINE LAMANTIA, MICHELE License Type: MD Provider ID: 247960 Provider Gender: Female License Number: G71855 NPI: 1124176102	 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	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER

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INTERNAL MEDICINE

PARK, DANIEL

License Type: MD

Provider ID: 247960

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

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

PARK, DANIEL

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A99433

NPI: 1538371844

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Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

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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

License Type: DO

Provider ID: 247960

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

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Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

POAST, JENNIFER

License Type: DO

Provider ID: 247960

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA

License Type: MD

Provider ID: 247960

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C. دليل الرعاية الأولية

Provider Gender: Female
License Number: A160493
NPI: 1659720555
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A160493
NPI: 1659720555
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UCSD MEDICAL
CTR
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
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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

**SCHNEIDER-MUNOZ,
MARGARITA**
License Type: MD
Provider ID: 247960
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
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Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

**SCHNEIDER-MUNOZ,
MARGARITA**
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: G81461
NPI: 1821299520
☐ Provider English Spoken: Y
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INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO

Provider ID: 247960

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, TRI

CITY MEDICAL CTR, SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, Adventist Health

and Rideout, UC SAN DIEGO

HEALTH - EAST CAMPUS

MEDICAL CENTER, Sharp

Grossmont Hospital

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

☐ Accessibility: CONTACT
PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO

Provider ID: 247960

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, TRI

CITY MEDICAL CTR, SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, Adventist Health

and Rideout, UC SAN DIEGO

HEALTH - EAST CAMPUS

MEDICAL CENTER, Sharp

Grossmont Hospital

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

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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

ANDERSON, MANDY

License Type: MD

Provider ID: 47414

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: www.syhealth.org

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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 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY

License Type: MD

Provider ID: 47414

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: www.syhealth.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

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

License Type: MD

Provider ID: 47414

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,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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 Website: www.syhealth.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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OBSTETRICS / GYNECOLOGY

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License Type: MD

Provider ID: 47414

Provider Gender: Female

License Number: C158543

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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,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

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 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

License Type: MD
Provider ID: 47414
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

 4050 BEYER BLVD
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 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

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

License Type: MD
Provider ID: 47414
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

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 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

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

License Type: MD
Provider ID: 247960
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
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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

License Type: MD
Provider ID: 247960
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

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IHP OF SOUTHERN CAL-PHP

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 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

DANESHMAND, SHAHRAM

License Type: MD
Provider ID: 47414
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

 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
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

DANESHMAND, SHAHRAM

License Type: MD
Provider ID: 47414
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
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IHP OF SOUTHERN CAL-PHP

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Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

DINH, MY

License Type: DO
Provider ID: 247960
Provider Gender: Female

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C. دليل الرعاية الأولية

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

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 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

DINH, MY

License Type: DO

Provider ID: 47414

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

 Provider English Spoken: Y
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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY

License Type: DO

Provider ID: 247960

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

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY

License Type: DO

Provider ID: 47414

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
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 Phone: (619) 662-4100

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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

License Type: MD

Provider ID: 47414

Provider Gender: Female

License Number: A175006

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4050 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
 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 / GYNCOLOGY

GOMEZ, DANIELA

License Type: MD
 Provider ID: 247960
 Provider Gender: Female
 License Number: A175006
 NPI: 1255878997
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 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
 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 / GYNCOLOGY

GOMEZ, DANIELA

License Type: MD
 Provider ID: 47414
 Provider Gender: Female
 License Number: A175006
 NPI: 1255878997
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
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 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNCOLOGY

GOMEZ, DANIELA

License Type: MD
 Provider ID: 247960
 Provider Gender: Female
 License Number: A175006
 NPI: 1255878997
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Board Certified Specialty: No
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OBSTETRICS / GYNCOLOGY

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JENKINS, ENCHANTA

License Type: MD

Provider ID: 47414

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SUTTER MEDICAL
CENTER SACRAMENTO

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

License Type: MD

Provider ID: 47414

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SUTTER MEDICAL
CENTER SACRAMENTO

Board Certified Specialty: No
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662-4100

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

License Type: MD

Provider ID: 47414

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

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 Phone: (619) 662-4100

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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

MENDEZ, DIEGO

License Type: MD

Provider ID: 47414

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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C. دليل الرعاية الأولية

*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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

*License Type: MD
Provider ID: 247960
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

*License Type: MD
Provider ID: 247960
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
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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

*License Type: MD
Provider ID: 247760
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*

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C. دليل الرعاية الأولية

 3364 BEYER BLVD
 SAN YSIDRO, 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

OPHTHALMOLOGY

SKAF, AYHAM

License Type: MD
 Provider ID: 247760
 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: www.syhealth.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ACEVEDO, SUSANA

License Type: MD
 Provider ID: 47414
 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: www.syhealth.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ACEVEDO, SUSANA

License Type: MD
 Provider ID: 47414

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: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND

License Type: MD
 Provider ID: 47414
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND

License Type: MD
Provider ID: 47414
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
 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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

License Type: MD
Provider ID: 47414
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

License Type: MD
Provider ID: 47414
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
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 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

FUJII, CINDY

License Type: MD
Provider ID: 47414
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

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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

PEDIATRICS

FUJII, CINDY

License Type: MD
 Provider ID: 47414
 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: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

HERMAN, ANDREA

License Type: MD
 Provider ID: 47414
 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
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 Accessibility: CONTACT PROVIDER

PEDIATRICS

HERMAN, ANDREA

License Type: MD
 Provider ID: 47414
 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
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 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

NISSAN, BETI

License Type: MD
 Provider ID: 247960
 Provider Gender: Female
 License Number: A64487
 NPI: 1396705299
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Persian

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
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

NISSAN, BETI

License Type: MD
Provider ID: 247960
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
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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
SA 8:30AM-2PM

PEDIATRICS

RODRIGUEZ, ALDO

License Type: MD
Provider ID: 47414
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

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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

License Type: MD
Provider ID: 47414
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: www.syhealth.org
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.

C. دليل الرعاية الأولية

 Accessibility: CONTACT PROVIDER

PEDIATRICS

RUELAS, ROBERTO

License Type: MD

Provider ID: 47414

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: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

RUELAS, ROBERTO

License Type: MD

Provider ID: 47414

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
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 Phone: (619) 662-4100

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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

SAHMS, TIMOTHY

License Type: MD

Provider ID: 247960

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
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

License Type: MD

Provider ID: 47414

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

 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
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.

C. دليل الرعاية الأولية

PEDIATRICS SAHMS, TIMOTHY License Type: MD Provider ID: 247960 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 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	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 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	SAN YSIDRO, 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
PEDIATRICS SAHMS, TIMOTHY License Type: MD Provider ID: 47414 Provider Gender: Male	PEDIATRICS SHAHIDYAZDANI, TINA License Type: MD Provider ID: 47414 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	PEDIATRICS SHAHIDYAZDANI, TINA License Type: MD Provider ID: 47414 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: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER
PEDIATRICS	PEDIATRICS	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

SULLIVAN, ELISSA

License Type: MD

Provider ID: 47414

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: www.syhealth.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

PEDIATRICS

SULLIVAN, ELISSA

License Type: MD

Provider ID: 47414

Provider Gender: Female

License Number: A169577

NPI: 1790216422

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

PEDIATRICS

TAYLOR, TASHA

License Type: MD

Provider ID: 47414

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, UCSD 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: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

TAYLOR, TASHA

License Type: MD

Provider ID: 47414

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, UCSD MEDICAL CTR

Board Certified Specialty: No

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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

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

C. دليل الرعاية الأولية

License Type: PA

Provider ID: 247960

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

 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

BUCKNER, JOSEPH

License Type: PA

Provider ID: 247960

Provider Gender: Male

License Number: PA18363

NPI: 1215909205

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG

License Type: PA

Provider ID: 247960

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG

License Type: PA

Provider ID: 247960

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

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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KAMOTO, LYNN

License Type: PA

Provider ID: 247960

Provider Gender: Female

License Number: PA17162

NPI: 1447326459

 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.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KAMOTO, LYNN

License Type: PA
Provider ID: 247960
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE

License Type: PA
Provider ID: 47414
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: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE

License Type: PA
Provider ID: 47414
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
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Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN

License Type: PA
Provider ID: 247960
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
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	 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	N  Accessibility: CONTACT PROVIDER
PHYSICIANS ASSISTANT		PHYSICIANS ASSISTANT
ROSS, COLLIN License Type: PA Provider ID: 247960 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	SUNA-SITTO, MOHEEN License Type: PA Provider ID: 247760 Provider Gender: Female License Number: PA22855 NPI: 1497196729  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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	PHYSICIANS ASSISTANT	 3364 BEYER BLVD SAN YSIDRO, 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
PHYSICIANS ASSISTANT	SMITH, DOUGLAS	PHYSICIANS ASSISTANT
SMITH, DOUGLAS License Type: PA Provider ID: 247960 Provider Gender: Male License Number: PA12304 NPI: 1902016611	License Type: PA Provider ID: 247960 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	SUNA-SITTO, MOHEEN License Type: PA Provider ID: 247760 Provider Gender: Female License Number: PA22855 NPI: 1497196729  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.

C. دليل الرعاية الأولية

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
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
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Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE

License Type: DPM
Provider ID: 247760
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
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE

License Type: DPM
Provider ID: 247760
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
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PROVIDER

PODIATRIST

MANCHEL, BRUCE

License Type: DPM
Provider ID: 247960
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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

License Type: DPM
Provider ID: 247960
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

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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SANTEE

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP
Provider ID: 275285
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
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 Phone: (619) 445-6687
 After Hours Phone: (619)
445-6687

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 10:30AM-11:45AM

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP
Provider ID: 275285
Provider Gender: Female
License Number: NP95005999

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1316478092

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 Phone: (619) 445-6687

 After Hours Phone: (619)
445-6687

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 10:30AM-11:45AM

CHIROPRACTOR

KELCHNER, MATTHEW

License Type: DC

Provider ID: 275285

Provider Gender: Male

License Number: DC22733

NPI: 1174656755

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 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 10:30AM-11:45AM

CHIROPRACTOR

KELCHNER, MATTHEW

License Type: DC

Provider ID: 275285

Provider Gender: Male

License Number: DC22733

NPI: 1174656755

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 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 10:30AM-11:45AM

FAMILY PRACTICE

BAIOU, MOHAMED

License Type: MD

Provider ID: 275285

Provider Gender: Male

License Number: A149492

NPI: 1447542659

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 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

BAIOU, MOHAMED

License Type: MD

Provider ID: 275285

Provider Gender: Male

License Number: A149492

NPI: 1447542659

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY

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

SANTEE, CA 92071
 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

FQHC

SAN YSIDRO HEALTH SANTEE

FAMILY MEDICINE,

Provider ID: 275285
 NPI: 1376184911
 Provider English Spoken: Y
 Cultural Competency: N
 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
 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 SANTEE

FAMILY MEDICINE,

Provider ID: 275285
 NPI: 1376184911
 Provider English Spoken: Y
 Cultural Competency: N
 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
 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

CORBIN, DAVID

License Type: MD
 Provider ID: 275285
 Provider Gender: Male
 License Number: C169916
 NPI: 1275627200

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hungarian
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 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

CORBIN, DAVID

License Type: MD
 Provider ID: 275285
 Provider Gender: Male
 License Number: C169916
 NPI: 1275627200

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hungarian
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 120 TOWN CENTER PKWY
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

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 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

GUERRA, JACQUELINE

License Type: MD
 Provider ID: 275285
 Provider Gender: Female
 License Number: A151449
 NPI: 1649685074
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GOLETA VALLEY COTTAGE HOSP
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 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 10:30AM-11:45AM

INTERNAL MEDICINE

GUERRA, JACQUELINE

License Type: MD
 Provider ID: 275285
 Provider Gender: Female
 License Number: A151449
 NPI: 1649685074
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GOLETA VALLEY COTTAGE HOSP
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 120 TOWN CENTER PKWY
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M 10:30AM-11:45AM

PEDIATRICS

ARLATA, TAMANTHA

License Type: MD
 Provider ID: 297749
 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\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

PEDIATRICS

IKE, ERICA

License Type: DO
 Provider ID: 275285
 Provider Gender: Female
 License Number: 20A16603
 NPI: 1821413907
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST JOHNS MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 120 TOWN CENTER PKWY
 SANTEE, CA 92071

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

PEDIATRICS

IKE, ERICA

License Type: DO
 Provider ID: 275285
 Provider Gender: Female
 License Number: 20A16603
 NPI: 1821413907
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST JOHNS MEDICAL CENTER
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 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

PEDIATRICS

MANGINE, REGINA

License Type: MD
 Provider ID: 204821
 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): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP
 Provider ID: 25735
 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

LEONARD, BEVERLY

License Type: NP
 Provider ID: 25735
 Provider Gender: Female
 License Number: NP10943

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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

License Type: NP

Provider ID: 25735

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 25735

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

License Type: DO

Provider ID: 25735

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

BACHARACH, REBECCA

License Type: DO

Provider ID: 25735

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

 Provider English Spoken: Y
Cultural Competency: N

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C. دليل الرعاية الأولية

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

License Type: MD

Provider ID: 25735

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

CARDONES, ARTHUR

License Type: MD

Provider ID: 25735

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

CONSTANTINO, STEPHANIE

License Type: MD

Provider ID: 25735

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

CONSTANTINO, STEPHANIE

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A149063

NPI: 1366824971

Provider English Spoken: Y

Provider Language(s)

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C. دليل الرعاية الأولية

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

License Type: MD
Provider ID: 25735
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

FAMILY PRACTICE

ROSE, PATRICIA

License Type: MD
Provider ID: 25735
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: 25735
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
 Hours: M-F
8:30AM-5:30PM

FQHC

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC,**
Provider ID: 25735
NPI: 1508801069
 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.

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

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

INTERNAL MEDICINE

NARAYANAN, MEENA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No

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

INTERNAL MEDICINE

NARAYANAN, MEENA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

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Board Certified Specialty: No

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Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25735

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

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SAN DIEGO

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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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25735

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

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Board Certified Specialty: No
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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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 25735

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

CARTER, KHALIL

License Type: MD

Provider ID: 25735

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

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W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

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C. دليل الرعاية الأولية

CHAKRABARTI, PRIYA

License Type: MD

Provider ID: 25735

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

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SAN DIEGO

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A163464

NPI: 1326531401

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Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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Grossmont Hospital

Board Certified Specialty: No

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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD

Provider ID: 25735

Provider Gender: Male

License Number: A108228

NPI: 1629277322

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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SAN DIEGO

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PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD

Provider ID: 25735

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License Number: A108228

NPI: 1629277322

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Cultural Competency: N

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PROVIDER

OBSTETRICS / GYNECOLOGY

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DORUELO, ASHLEY

License Type: MD

Provider ID: 25735

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

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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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD

Provider ID: 25735

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
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD

Provider ID: 25735

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

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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD

Provider ID: 25735

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
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C. دليل الرعاية الأولية

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

License Type: MD
 Provider ID: 25735
 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
 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

LIPSCHITZ, LISA

License Type: MD
 Provider ID: 25735
 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
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 SPRING VALLEY, CA 91977
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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
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD
 Provider ID: 25735
 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

SAPRA, SONIA

License Type: MD

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Provider ID: 25735
 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
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 SAN DIEGO

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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

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO
 Provider ID: 25735
 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

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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

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO
 Provider ID: 25735
 Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198
☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
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 FAMILY HEALTH CENTERS OF
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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

ZIEG, ALAN

License Type: MD
 Provider ID: 25735
 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
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 Phone: (619) 515-2555
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 American Sign Language (ASL):

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C. دليل الرعاية الأولية

N  Accessibility: CONTACT PROVIDER  Hours: M-F 9AM-5PM	PROVIDER  Hours: M-F 9AM-5PM	License Number: A169342 NPI: 1750745493
OBSTETRICS / GYNECOLOGY	PEDIATRICS	 Provider English Spoken: Y  Provider Language(s) Spoken: Spanish
ZIEG, ALAN License Type: MD Provider ID: 25735 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	JI, AMANDA License Type: MD Provider ID: 25735 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 PEDIATRICS JI, AMANDA License Type: MD Provider ID: 25735 Provider Gender: Female	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 License Type: PA Provider ID: 25735 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  8788 JAMACHA RD

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C. دليل الرعاية الأولية

SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619) 515-2555

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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

LOPEZ, MARIO

License Type: PA

Provider ID: 25735

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

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After Hours Phone: (619) 515-2555

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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

License Type: PA

Provider ID: 25735

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

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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

TRAN, TU-UYEN

License Type: PA

Provider ID: 25735

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

License Type: PA

Provider ID: 25735

Provider Gender: Male

License Number: PA55067

NPI: 1669756128

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

 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

PHYSICIANS ASSISTANT

TURNER, ERIC

License Type: PA
Provider ID: 25735
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
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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
 Hours: M-F
8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 304652
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

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 304652
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

License Type: MD
Provider ID: 304652
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
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	 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: PALOMAR MEDICAL CENTER Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	742-9912  Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N
<u>FAMILY PRACTICE</u>		 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
AYON MARTINEZ, CARLOS License Type: MD Provider ID: 304652 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	<u>FAMILY PRACTICE</u> SCHULTZ, JAMES License Type: MD Provider ID: 304652 Provider Gender: Male License Number: G61829 NPI: 1356376164
 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	 Provider English Spoken: Y  Provider Language(s) Spoken: Farsi, Modern 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
<u>FAMILY PRACTICE</u>		<u>FAMILY PRACTICE</u> CASTANER, ZALYA License Type: MD Provider ID: 304652 Provider Gender: Female License Number: A139490 NPI: 1487072179	 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
CASTANER, ZALYA License Type: MD Provider ID: 304652 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			

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

License Type: MD

Provider ID: 304652

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi, Modern 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: 304652

NPI: 1437335148

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

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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

FQHC

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 304652

NPI: 1437335148

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

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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-5PM

PEDIATRICS

CRAYCHEE, LEO

License Type: MD

Provider ID: 205034

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

Min/Max Age: 0\19

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C. دليل الرعاية الأولية

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

VISTA

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289896

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

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

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 Provider Language(s)
Spoken: Chinese, Mandarin

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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

 Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 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 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 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.

C. دليل الرعاية الأولية

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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VISTA, CA 92083

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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

License Type: NP

Provider ID: 289896

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

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After Hours Phone: (760)
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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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, JINA

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95020624

NPI: 1225500259

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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VISTA, CA 92083

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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

CHIROPRACTOR

JU, NATHANIEL

License Type: DC

Provider ID: 289896

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

CHIROPRACTOR

JU, NATHANIEL

License Type: DC

Provider ID: 289896

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

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 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

License Type: DO

Provider ID: 289896

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

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

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

License Type: DO

Provider ID: 289896

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

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

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289896

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, 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

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C. دليل الرعاية الأولية

⌚ Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289896

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,
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: 289898

NPI: 1851300123

☐ Provider English Spoken: Y
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-TU 8:30AM-5PM
TH-F 8:30AM-5PM

FQHC

VCC DURIAN,

Provider ID: 289898

NPI: 1851300123

☐ Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP

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⌚ After Hours Phone: (844)
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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-TU 8:30AM-5PM
TH-F 8:30AM-5PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 289896

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):

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♿ Accessibility: CONTACT

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C. دليل الرعاية الأولية

PROVIDER
 Hours: M 8AM-5PM
 TU 10:30AM-7:30PM
 W-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 289896
 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

License Type: MD

Provider ID: 204366

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

HARTFORD, NICOLE

License Type: DO

Provider ID: 289898

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.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

HARTFORD, NICOLE

License Type: DO

Provider ID: 289898

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.vistacommunityclinic.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.

C. دليل الرعاية الأولية

PEDIATRICS	
KRAK, MICHAEL License Type: MD Provider ID: 302573 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\18 American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8:30AM-6PM SA 9AM-1PM	License Type: MD Provider ID: 289896 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	
LUSCHWITZ, BRIAN License Type: MD Provider ID: 289896 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, SCRIPPS MEMORIAL HOSPITAL
PEDIATRICS	
LUSCHWITZ, BRIAN License Type: MD Provider ID: 289896 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, SCRIPPS MEMORIAL HOSPITAL
PEDIATRICS	
NAUDIN, VERONICA License Type: MD Provider ID: 204706 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	

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C. دليل الرعاية الأولية

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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

NISHIKAWA, MOENA

License Type: MD

Provider ID: 310501

Provider Gender: Female

NPI: 1407434533

Provider English Spoken: Y

Provider Language(s)

Spoken: Japanese

Cultural Competency: N

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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

PERTL, URSULA

License Type: MD

Provider ID: 291211

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

ANGELES, PALOMAR

MEDICAL CENTER

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\18

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-2PM
M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289896

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

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM	PHYSICIANS ASSISTANT WEAVER, APRIL License Type: PA Provider ID: 289896 Provider Gender: Female License Number: PA20775	NPI: 1063552800  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No
PEDIATRICS RONAN, KEVIN License Type: MD Provider ID: 289896 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 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):	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 PHYSICIANS ASSISTANT WEAVER, APRIL License Type: PA Provider ID: 289896 Provider Gender: Female License Number: PA20775	 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
N  Accessibility: CONTACT PROVIDER  Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM	PHYSICIANS ASSISTANT WEAVER, APRIL License Type: PA Provider ID: 289896 Provider Gender: Female License Number: PA20775	

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D. دليل مقدمي الخدمات المتخصصين

DOULA ARROYO, ELYDE Board Certified Specialty: No FOR THE VILLAGE INC Phone: (619) 657-3384 After Hours Phone: (619) 657-3384 Provider Gender: Female NPI: 1841985348 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-W 5PM-9AM TH-F 9AM-5PM Website: www.forthevillage.org	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-W 5PM-9AM TH-F 9AM-5PM Website: www.forthevillage.org	Board Certified Specialty: No FOR THE VILLAGE INC Phone: (619) 657-3384 After Hours Phone: (619) 657-3384 Provider Gender: Female NPI: 1871327684 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-W 5PM-9AM TH-F 9AM-5PM Website: www.forthevillage.org
DOULA CARAWAY, ARLENE Board Certified Specialty: No FOR THE VILLAGE INC Phone: (619) 657-3384 After Hours Phone: (619) 657-3384 Provider Gender: Female NPI: 1205662665 Provider English Spoken: Y Provider Language(s)	DOULA CARTER, LEXXUS Board Certified Specialty: No FOR THE VILLAGE INC Phone: (619) 657-3384 After Hours Phone: (619) 657-3384 Provider Gender: Female NPI: 1093413304 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-W 5PM-9AM TH-F 9AM-5PM Website: www.forthevillage.org	DOULA CORLEY MILNER, JANTENEE Board Certified Specialty: No FOR THE VILLAGE INC Phone: (619) 657-3384 After Hours Phone: (619) 657-3384 Provider Gender: Female NPI: 1194423194 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: No Min/Max Age: 0\None American Sign Language (ASL): N
	DOULA CENTENO QUIEL, JULISSA	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-W 5PM-9AM
 TH-F 9AM-5PM
 Website: www.forthevillage.org

DOULA

FOR THE VILLAGE INC,

 Phone: (619) 657-3384
 Fax: (619) 374-2418
 After Hours Phone: (619) 657-3384
 NPI: 1366156952
 Provider 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: www.forthevillage.org

DOULA

GRANT, PERRIETTE

Board Certified Specialty: No
 FOR THE VILLAGE INC

 Phone: (619) 657-3384
 After Hours Phone: (619) 657-3384
 Provider Gender: Female
 NPI: 1740060466
 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-W 5PM-9AM
 TH-F 9AM-5PM
 Website: www.forthevillage.org

DOULA

KNOX, LATANIA

Board Certified Specialty: No
 FOR THE VILLAGE INC

 Phone: (619) 657-3384
 After Hours Phone: (619) 657-3384
 Provider Gender: Female
 NPI: 1356047153
 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-W 5PM-9AM
 TH-F 9AM-5PM
 Website: www.forthevillage.org

DOULA

MERCADO FORSECK, ALEJANDRA

Board Certified Specialty: No
 FOR THE VILLAGE INC

 Phone: (619) 657-3384
 After Hours Phone: (619) 657-3384
 Provider Gender: Female
 NPI: 1538996632
 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-W 5PM-9AM
 TH-F 9AM-5PM
 Website: www.forthevillage.org

DOULA

OMAE, ILANA

Board Certified Specialty: No
 FOR THE VILLAGE INC

 Phone: (619) 657-3384
 After Hours Phone: (619) 657-3384
 Provider Gender: Female
 NPI: 1548024821
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: No

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-W 5PM-9AM
TH-F 9AM-5PM
Website: www.forthethevillage.org

DOULA

VARGAS, BRIANDA

Board Certified Specialty: No
FOR THE VILLAGE INC

Phone: (619) 657-3384
After Hours Phone: (619) 657-3384
Provider Gender: Female
NPI: 1942025721
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-W 5PM-9AM
TH-F 9AM-5PM
Website: www.forthethevillage.org

DOULA

WASHINGTON, KRYSTAL

Board Certified Specialty: No

FOR THE VILLAGE INC
Phone: (619) 657-3384
After Hours Phone: (619) 657-3384
Provider Gender: Female
NPI: 1982468427
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-W 5PM-9AM
TH-F 9AM-5PM
Website: www.forthethevillage.org

ALPINE

CHIROPRACTOR

PHILLIPS, KATHERINE

Provider ID: 310866
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
Provider Gender: Female
NPI: 1063927242
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

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
Fax: (619) 205-6305
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

SILVA SEPULVEDA, JOSE

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D. دليل مقدمي الخدمات المتخصصين

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, PIONEERS 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

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\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health 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

CAMPOS, PRISCILLA

Provider ID: 314402

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: Female

NPI: 1508217399

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\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: 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

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 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

CHAVEZ SANTOS, 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) 736-6744

 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

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D. دليل مقدمي الخدمات المتخصصين

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) 631-3016
 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
 Website: N/A
 IPA: Community Care IPA LLC

NEUROLOGY

HAMILTON, ROSS
 Provider ID: 310675
 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: 1538587852

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 MEDICAL CENTER, TRI CITY
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, 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-4:30PM
 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):

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D. دليل مقدمي الخدمات المتخصصين

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

PHYSICAL MEDICINE / REHABILITATION

BO, CHRISTOPHER

Provider ID: 315931
 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: 1952863052
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, 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: Community Care IPA LLC

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN

Provider ID: 269004
 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: 1598160343

 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
 Hours: M-F 8AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

INOCELDA, ANDREW

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D. دليل مقدمي الخدمات المتخصصين

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: USC
Arcadia Hospital, 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
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

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D. دليل مقدمي الخدمات المتخصصين

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

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, TRI CITY MEDICAL CTR,

PALOMAR MEDICAL CENTER,

COLUSA 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

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
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

Hospital Affiliation: UCSD
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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

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

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D. دليل مقدمي الخدمات المتخصصين

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, 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 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CHULA VISTA

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
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: 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

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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, 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

CERTIFIED NURSE PRACTITIONER

CARRION-GELABERT, ANA

Provider ID: 302402

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: 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

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D. دليل مقدمي الخدمات المتخصصين

 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, 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,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE LA CRUZ, 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

IBARRA, MARTHA
Provider ID: 308352
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 855 3RD AVE STE 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 PRACTITIONER

KEUM, SARAH
Provider ID: 312108
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 450 4TH AVE STE 311
CHULA VISTA, CA 91910
 Phone: (619) 371-9156
Fax: (619) 872-0997
 After Hours Phone: (619)
371-9156
Provider Gender: Female
NPI: 1053183525
 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-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

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301598

Board Certified Specialty: No
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

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

TRESSLAR, PERI

Provider ID: 312028

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Phone: (619) 567-7007

Fax: (619) 567-7775

After Hours Phone: (619)
567-7007

Provider Gender: Female

NPI: 1548021512

Provider 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: 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\18

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

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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Provider ID: 310870

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM
SA 8AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BECERRA, MAURA

Provider ID: 313437

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1710561279

 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

SPAK, DARYL

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1285128025

 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: IHP of Southern Cal-PHP

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):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

CHAVEZ, LUIS

Provider ID: 311342

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 296 H ST STE 301
CHULA VISTA, CA 91910

 Phone: (619) 416-3510

Fax: (619) 243-3216

 After Hours Phone: (619)
416-3510

Provider Gender: Male

NPI: 1295224905

 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, 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: 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

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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-PHP

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-PHP

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

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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: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

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

KANDAHARI, MASOOM

Provider ID: 315278

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 450 4TH AVE STE 311
CHULA VISTA, CA 91910

 Phone: (619) 371-9156

Fax: (619) 872-0997

 After Hours Phone: (619)
371-9156

Provider Gender: Male

NPI: 1467448100

 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-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified Specialty: Yes
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

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: 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

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D. دليل مقدمي الخدمات المتخصصين

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

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, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, UC SAN DIEGO
HEALTH - EAST CAMPUS
MEDICAL 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

 Website: N/A

IPA: Community Care IPA LLC

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, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
Sharp Grossmont Hospital, UC
SAN DIEGO HEALTH - EAST
CAMPUS MEDICAL CENTER,
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

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (619) 616-2100
 Fax: (619) 616-2104
 After Hours Phone: (619) 616-2100
 Provider Gender: Male
 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: 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: Male
 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: Male
 NPI: 1811307051
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital, SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 296993
 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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

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D. دليل مقدمي الخدمات المتخصصين

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: Rady Childrens Health
Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294653
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: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL
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: 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, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):

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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
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: 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) 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

MATOKA, 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, 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

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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

 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

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 CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

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

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

NEUROLOGY

HOSSEIN ZADEH MALEKI, ANA

Provider ID: 304999
 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: Female
 NPI: 1316471485
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Persian
 Cultural Competency: N
 Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY 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

NEUROLOGY

MANDEVILLE, ROSS

Provider ID: 309932
 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: 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 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: 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, 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

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 295744

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 450 4TH AVE STE 215

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D. دليل مقدمي الخدمات المتخصصين

CHULA VISTA, CA 91910
 Phone: (619) 425-3840
 Fax: (619) 485-5440
 After Hours Phone: (619) 425-3840
 Provider Gender: Male
 NPI: 1225474034
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, SCRIPPS MERCY
 HOSPITAL CHULA VISTA,
 TEMECULA VALLEY HOSPITAL
 INC, SHARP CHULA VISTA
 MED CTR
 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
 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-12PM
 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
 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-12PM
 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
 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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Provider ID: 308604

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-6PM
SA 7AM-2PM

 Website: N/A

IPA: Community Care IPA LLC

OPHTHALMOLOGY

GOLDMAN, DAVID

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

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

SHAH, SONA

Provider ID: 314736

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: Female

NPI: 1750943403

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KECK

HOSPITAL OF USC, USC

KENNETH NORRIS JR

CANCER HOSPITAL, USC

VERDUGO HILLS 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-TH 8AM-5PM
F 8AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

AMINI, AFSANEH

Provider ID: 316369

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1790099943

 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: 18\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M 8AM-5PM W-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP	PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP	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 Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N
OPTOMETRIST AMINI, AFSANEH Provider ID: 313446 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 678 THIRD AVE CHULA VISTA, CA 91911 Phone: (619) 662-4100 Fax: (619) 662-4196 After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1790099943 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	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 8AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP
OPTOMETRIST HO, AMIEE Provider ID: 297633 Board Certified Specialty: No	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 Fax: (619) 662-4196 After Hours Phone: (619) 662-4100 Provider Gender: Female	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.

D. دليل مقدمي الخدمات المتخصصين

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: 304537

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 835 3RD 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: 306902

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 835 3RD 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

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

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN

Provider ID: 310877
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1053841478

 Provider 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

THACH, QUEEN

Provider ID: 310536
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 835 3RD 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: 1053841478

 Provider 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

THACH, QUEEN

Provider ID: 312234
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 835 3RD 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: 1053841478

 Provider 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

OTOLARYNGOLOGY

CHANG, EDWARD

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

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303782
Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

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\18
 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

CRAWFORD, MICHAEL

Provider ID: 311161
 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: Male
 NPI: 1336727791
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 CHILDRENS HOSPITAL OF
 ORANGE COUNTY, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 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, SOUTHWEST
 HEALTHCARE INLAND
 VALLEY HOSPITAL
 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: 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

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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: 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\None

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

SHERER, KIMBERLY

Provider ID: 311933

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: 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

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 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

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D. دليل مقدمي الخدمات المتخصصين

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): 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: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619) 761-5308

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

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D. دليل مقدمي الخدمات المتخصصين

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
 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 3RD 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

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D. دليل مقدمي الخدمات المتخصصين

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) 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

PODIATRIST

BRAZIER, SETH

Provider ID: 306399

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 855 3RD AVE STE 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\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PODIATRIST

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D. دليل مقدمي الخدمات المتخصصين

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) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

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

PODIATRIST

CAINE, SAMUEL

Provider ID: 308211

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: 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):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, 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-TH 9AM-4:30PM
F 9AM-12PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, JOHN

Provider ID: 312175

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

345 F ST STE 100

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D. دليل مقدمي الخدمات المتخصصين

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-TH 9AM-4:30PM
 F 9AM-12PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

PODIATRIST

READ, TRENTON
 Provider ID: 296655
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PSYCHOLOGIST

GOULD, HILARY

Provider ID: 290467
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: 1104297696

 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: 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

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D. دليل مقدمي الخدمات المتخصصين

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 DIETITIAN / NUTRITIONIST

**KRISHNAMURTHY,
MEENAKSHI**

Provider ID: 313088

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 855 3RD AVE STE 2210
CHULA VISTA, CA 91911

 Phone: (619) 427-1144

Fax: (619) 427-1185

 After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1790304822

 Provider 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

REGISTERED DIETITIAN / NUTRITIONIST

**KRISHNAMURTHY,
MEENAKSHI**

Provider ID: 311656

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: Female

NPI: 1790304822

 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

REGISTERED DIETITIAN / NUTRITIONIST

**KRISHNAMURTHY,
MEENAKSHI**

Provider ID: 312557

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 855 3RD AVE STE 2210

CHULA VISTA, CA 91911

 Phone: (619) 427-1144

Fax: (619) 427-1185

 After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1790304822

 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

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 310337

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 386 E H ST STE 203
CHULA VISTA, CA 91910

 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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

 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: 316364
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 386 E H ST STE 203
CHULA VISTA, CA 91910
 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

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

CHUNG, PETER

Provider ID: 314477

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

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D. دليل مقدمي الخدمات المتخصصين

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1023837887

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Korean

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-12PM

🌐 Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

CHUNG, PETER

Provider ID: 314478

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 386 E H ST STE 203

CHULA VISTA, CA 91910

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1023837887

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Korean

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-12PM

🌐 Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 880 3RD AVE STE A
CHULA VISTA, CA 91911

☎ Phone: (619) 205-4585

Fax: (619) 271-3183

☎ After Hours Phone: (619) 205-4585

Provider Gender: Female

NPI: 1063170603

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 55\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

JIMENEZ, ANDREA

Provider ID: 299889

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: 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 7AM-7PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 316348

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

IHP OF SOUTHERN CAL-PHP

386 E H ST STE 203
CHULA VISTA, CA 91910
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 PROVIDER
Hours: M 8AM-5PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 310382
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
386 E H ST STE 203
CHULA VISTA, CA 91910
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 PROVIDER
Hours: M 8AM-5PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 310746
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
386 E H ST STE 203
CHULA VISTA, CA 91910
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
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 8AM-5PM
TU 7AM-6PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 316396
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
386 E H ST STE 203
CHULA VISTA, CA 91910
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
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 8AM-5PM
TU 7AM-6PM

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D. دليل مقدمي الخدمات المتخصصين

W-F 8AM-5PM

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 301380
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: Female

NPI: 1699357525

 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: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287100

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: 1699357525

 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,
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,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, ALEXANDRA

Provider ID: 316236

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: 1073344172

 Provider English Spoken: Y
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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 316421

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 386 E H ST STE 203
CHULA VISTA, CA 91910

 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,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305014

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: 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: 310381

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 386 E H ST STE 203

CHULA VISTA, CA 91910

 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,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 316387

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 386 E H ST STE 203
CHULA VISTA, CA 91910

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 7AM-6PM

W-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

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: 310722

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 386 E H ST STE 203

CHULA VISTA, CA 91910

 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 8AM-5PM
TU 7AM-6PM

W-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

PASCUAL, CHRISTOPHER

Provider ID: 314202

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 386 E H ST STE 203

CHULA VISTA, CA 91910

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

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: 1093328064

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM

 Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

PASCUAL, CHRISTOPHER

Provider ID: 314203

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: 1093328064

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 10\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-5PM

SA 8AM-2PM

 Website: N/A

IPA: Community Care IPA LLC

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

 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-12PM

W-TH 7AM-7PM

F 7AM-12PM

 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):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7AM-7PM
TU 7AM-12PM

W-TH 7AM-7PM

F 7AM-12PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

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D. دليل مقدمي الخدمات المتخصصين

SPARKS, TODD

Provider ID: 316468

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

386 E H ST STE 203
CHULA VISTA, CA 91910

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):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7AM-7PM
W-TH 7AM-7PM
F 7AM-12PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 310371

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

386 E H ST STE 203
CHULA VISTA, CA 91910

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):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7AM-7PM
W-TH 7AM-7PM
F 7AM-12PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN

Provider ID: 310409

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

386 E H ST STE 203
CHULA VISTA, CA 91910

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 8AM-5PM
W-F 8AM-5PM

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

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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

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN

Provider ID: 316422
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 386 E H ST STE 203
 CHULA VISTA, CA 91910
 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 8AM-5PM
 W-F 8AM-5PM

 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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

SUGGS, SARAH

Provider ID: 316466

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 386 E H ST STE 203
 CHULA VISTA, CA 91910

 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: 310419

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

 386 E H ST STE 203
 CHULA VISTA, CA 91910

 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

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VAISMAN, SAMANTHA

Provider ID: 311836
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 386 E H ST STE 203
CHULA VISTA, CA 91910

 Phone: (619) 482-3000
Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1457022071

 Provider 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

VERISSIMO, TAYLOR

Provider ID: 310405
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 386 E H ST STE 203

CHULA VISTA, CA 91910

 Phone: (619) 482-3000
Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1124871629

 Provider 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

VERISSIMO, TAYLOR

Provider ID: 310406
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: 1124871629

 Provider 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

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301532
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: 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

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D. دليل مقدمي الخدمات المتخصصين

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

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, UC SAN DIEGO

HEALTH - EAST CAMPUS

MEDICAL CENTER, 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

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

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D. دليل مقدمي الخدمات المتخصصين

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

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 GENERAL

BORTZ, PASCAL

Provider ID: 313996
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 230 PROSPECT PL STE 340
 CORONADO, CA 92118
 Phone: (858) 457-4917
 Fax: (858) 646-0019
 After Hours Phone: (858) 457-4917

Provider Gender: Male
 NPI: 1821330796
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL 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 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

EL CAJON

CERTIFIED NURSE PRACTITIONER

ALVA, WENDY
 Provider ID: 311724
 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: Female
 NPI: 1023085560
 Provider 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

ARMSTON, LINDSEY
 Provider ID: 312119
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 892 E MADISON AVE
 EL CAJON, CA 92020
 Phone: (619) 737-1117
 Fax: (619) 880-8535
 After Hours Phone: (619) 737-1117
 Provider Gender: Female
 NPI: 1841851375
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, SCRIPPS
 MERCY HOSPITAL CHULA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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-6PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CARRION-GELABERT, ANA

Provider ID: 312136

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 892 E MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 737-1117

Fax: (619) 880-8535

 After Hours Phone: (619)
737-1117

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: 312113

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 892 E MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 737-1117

Fax: (619) 880-8535

 After Hours Phone: (619)
737-1117

Provider Gender: Female

NPI: 1528632742

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

 Hours: M-F 8AM-8PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE LA CRUZ, ALEKSANDRYA

Provider ID: 312156

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 892 E MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 737-1117

Fax: (619) 880-8535

 After Hours Phone: (619)
737-1117

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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DOWNEY, NANCY

Provider ID: 311826

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

662-4100
 Provider Gender: Female
 NPI: 1578051017
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 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

GARCIA, CATALINA
 Provider ID: 311391
 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: 1659148104
 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

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

NGUYEN, VANESSA
 Provider ID: 312138
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 892 E MADISON AVE
 EL CAJON, CA 92020
 Phone: (619) 737-1117
 Fax: (619) 880-8535
 After Hours Phone: (619)
 737-1117
 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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
 Website: N/A
 IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

GASTROENTEROLOGY

CHAVEZ, LUIS

Provider ID: 311341
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 2732 NAVAJO RD STE 200
 EL CAJON, CA 92020
 Phone: (619) 416-3510
 Fax: (619) 243-3216
 After Hours Phone: (619) 416-3510
 Provider Gender: Male
 NPI: 1295224905
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, 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: IHP of Southern Cal-PHP

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296067

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D. دليل مقدمي الخدمات المتخصصين

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

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

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D. دليل مقدمي الخدمات المتخصصين

 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
IPA: Community Care IPA LLC

 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

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, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

Sharp Grossmont Hospital, UC

SAN DIEGO HEALTH - EAST

CAMPUS MEDICAL CENTER,

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

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D. دليل مقدمي الخدمات المتخصصين

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: Male

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: 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: Male

NPI: 1811307051

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

GUPTA, MONIKA

Provider ID: 312122

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

892 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 737-1117

Fax: (619) 880-8535

After Hours Phone: (619)
737-1117

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

HOSSEIN ZADEH MALEKI, ANA

Provider ID: 312128

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

892 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 737-1117

Fax: (619) 880-8535

After Hours Phone: (619)
737-1117

Provider Gender: Female

NPI: 1316471485

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA

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D. دليل مقدمي الخدمات المتخصصين

VALLEY HOSPITAL INC, SHARP MEMORIAL HOSP
CHULA VISTA MED CTR, LOMA
LINDA UNIVERSITY
CHILDRENS HOSPITAL, LOMA
LINDA UNIVERSITY MED CTR,
RIVERSIDE COUNTY
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

NEUROLOGY

MANDEVILLE, ROSS

Provider ID: 312140
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 892 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 737-1117
Fax: (619) 880-8535
 After Hours Phone: (619)
737-1117
Provider Gender: Male
NPI: 1205084183
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, MAYERS

NEUROLOGY

MAREK, MAKSYM

Provider ID: 312137
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 892 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 737-1117
Fax: (619) 880-8535
 After Hours Phone: (619)
737-1117
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, 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-6PM
SA 9AM-12:30PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 312118
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 892 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 737-1117
Fax: (619) 880-8535
 After Hours Phone: (619)
737-1117
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, SHARP CHULA VISTA
MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\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-6PM  Website: N/A IPA: IHP of Southern Cal-PHP	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	Medi-Cal Open 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: 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	Provider Gender: Female NPI: 1053841478  Provider 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	PEDIATRICS MURADIAN-MOORE, SARAH Provider ID: 311838 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  855 E MADISON AVE EL CAJON, CA 92020  Phone: (833) 867-4642  Fax: (360) 462-2746  After Hours Phone: (833) 867-4642 Provider Gender: Female NPI: 1700205895  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\18 American Sign Language (ASL): N
OPTOMETRIST THACH, QUEEN Provider ID: 312236 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: 1053841478  Provider English Spoken: Y Cultural Competency: N	OPTOMETRIST THACH, QUEEN Provider ID: 310538 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  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: 1053841478  Provider English Spoken: Y Cultural Competency: N	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 THACH, QUEEN Provider ID: 312236 Board Certified Specialty: No	OPTOMETRIST THACH, QUEEN Provider ID: 310538 Board Certified Specialty: No	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

ACOSTA, ANGELICA

Provider ID: 310413

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: 1952513517

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

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

Cultural 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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D. دليل مقدمي الخدمات المتخصصين

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) 205-6305

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

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: 312107

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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: Community Care IPA LLC,
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: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD

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D. دليل مقدمي الخدمات المتخصصين

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: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD

Provider ID: 312164

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

WILKINS, MARJORIE

Provider ID: 313820

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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: 1699781062

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-6PM

Website: N/A

IPA: Community Care IPA LLC

EL CENTRO

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

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D. دليل مقدمي الخدمات المتخصصين

 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, 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

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,
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

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
Cultural 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

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

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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: 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

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

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) 339-7100

Provider Gender: Female

NPI: 1417483587

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: ADVENTIST

HEALTH SIERRA VISTA, 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

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

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D. دليل مقدمي الخدمات المتخصصين

 **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

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, UCSD MEDICAL 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: UCSD Medical Group

INFECTIOUS DISEASE

AKRAMI, KEVAN

Provider ID: 277342

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: 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

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

AMANN, CHRISTOPHER

Provider ID: 277245

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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, SCRIPPS MEMORIAL HOSPITAL, 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

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, 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

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

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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): Hospital, UCSD LA JOLLA
JOHN SALLY THORNTON

 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

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,

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

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

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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

PULMONARY DISEASES

LEVERONE, NICHOLAS

Provider ID: 313306

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: 1407388564

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, 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

 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

Provider Gender: Male

NPI: 1578903936

 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

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS

Provider ID: 310449

Board Certified Specialty: No

UCSD MEDICAL GROUP

 477 N EL CAMINO REAL
STE D300

ENCINITAS, CA 92024

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1609225135
 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

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
 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

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
 Provider ID: 311061
 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: 1851914220
 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

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

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D. دليل مقدمي الخدمات المتخصصين

 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
 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

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

Provider ID: 301447
 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: No
 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

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282071

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D. دليل مقدمي الخدمات المتخصصين

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

SAADA, HASSAN

Provider ID: 313176

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

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: Male

NPI: 1760009518

Provider 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

SRILASAK, MICHELE

Provider ID: 281856

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D. دليل مقدمي الخدمات المتخصصين

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: 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

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

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN

Provider ID: 310372

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Phone: (616) 361-8292

Fax: (940) 478-8378

After Hours Phone: (616)
361-8292

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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, 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

FAMILY PRACTICE

SHAH, NIYATI

Provider ID: 312273

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: Female

NPI: 1891136354

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

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
STE 200

ENCINITAS, CA 92024

Phone: (858) 249-2560

Fax: (888) 539-8781

After Hours Phone: (858)
249-2560

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, CORONA

REGIONAL MED CTR,

CORONA REGIONAL MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR, UCI

HEALTH-FOUNTAIN 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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): IPA: UCSD Medical Group

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, 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

♿ 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) 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, 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: 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, 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	MEDICINE RICHARDSON, ALVIE Provider ID: 314184 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  477 N EL CAMINO REAL BLDG D 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, 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	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, 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
MATERNAL AND FETAL MEDICINE NHAN-CHANG, CHIA-LING Provider ID: 312714 Board Certified Specialty: No UCSD MEDICAL GROUP  781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1265686794  Provider 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	MATERNAL AND FETAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MEDICINE	MATERNAL AND FETAL MEDICINE	Website: N/A IPA: UCSD Medical Group
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 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	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 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	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, 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: Rady Childrens Health Network NEONATAL / PERINATAL MEDICINE NYMAN, KATHERINE

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D. دليل مقدمي الخدمات المتخصصين

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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

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: 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, 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: 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\None

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

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\18 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network	NETWORK 477 N EL CAMINO REAL BLDG D ENCINITAS, CA 92024 Phone: (760) 944-5545 Fax: (760) 944-3927 After Hours Phone: (760) 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, 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	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: 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, 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 CHILD KIM MCMANUS, OLIVIA Provider ID: 316535 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	NEUROLOGY CHILD KIM MCMANUS, OLIVIA Provider ID: 206258 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	OBSTETRICS / GYNECOLOGY ASHAK, DANI Provider ID: 311188 Board Certified Specialty: No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD ENCINITAS, CA 92024 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: 1790149425

☑ 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

🌐 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, 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

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, 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

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, 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

DRIEBE, AMY

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1730507567

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, 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

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, 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: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

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

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA

Provider ID: 311111
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: 1558708297

 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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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, PALOMAR MEDICAL CENTER, 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

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, 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: 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
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, 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

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205507
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

📍 477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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, PALOMAR MEDICAL CENTER, 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

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, 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, 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, SCRIPPS MERCY HOSPITAL CHULA VISTA, 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: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA

Provider ID: 311887
 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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1124580139

 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

 Website: N/A

IPA: Rady Childrens Health
Network

OPTOMETRIST

ZAIDI, NOORINA

Provider ID: 310607

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Provider Gender: Female

NPI: 1023477262

 Provider 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

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

FRANK, ETHAN

Provider ID: 310280

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: 1720584345

 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

 Website: N/A

IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244900

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

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
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

OTOLARYNGOLOGY

QIAN, ZHEN

Provider ID: 311004

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: 1356796783

 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):

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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

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
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

LASALLE, ELIZABETH

Provider ID: 313254

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: 1235634015

 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: 239115

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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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

SILVA SEPULVEDA, JOSE

Provider ID: 314199

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL
BLDG D
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, PIONEERS 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

SILVA SEPULVEDA, 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, PIONEERS 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 ENDOCRINOLOGY

RANADIVE, SAYALI

Provider ID: 311396

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: 1588846380

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Hindi,
Marathi, 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\18

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\None

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

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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

PEDIATRIC

GASTROENTEROLOGY

DICKERSON, ANDREW

Provider ID: 310620

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: 1063916633

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN

Provider ID: 310302

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 966-8052
Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1609365402

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

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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

944-5545
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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

LANDIS, SARAH
 Provider ID: 313723
 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: Female
 NPI: 1144733676
 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

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
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-5545
 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

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\18
 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
 IPA: UCSD Medical Group

PSYCHOLOGIST

GOMEZ, JUANITA
 Provider ID: 291423

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D. دليل مقدمي الخدمات المتخصصين

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

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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: UCSD Medical Group	 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
<u>SURGERY PEDIATRIC</u>	<u>SURGERY PEDIATRIC</u>	<u>SURGERY PEDIATRIC</u>
FAIRBANKS, TIMOTHY Provider ID: 205497 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: 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	KLING, KAREN Provider ID: 206128 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: 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	THOMPSON, KYLE Provider ID: 310987 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: 1598147050  Provider English Spoken: Y  Provider Language(s) Spoken: French 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  Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health Network

UROLOGY

MOORE, SARAH

Provider ID: 311608

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: 1538620760

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
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

ESCONDIDO

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
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

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (888) 873-6220

Provider Gender: Male

NPI: 1871799528

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: German, Spanish

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

CERTIFIED NURSE PRACTITIONER

BALLOUT, REEM

Provider ID: 310193

Board Certified Specialty: No

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

Provider Gender: Female

NPI: 1780459958

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 277866

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARGANO-CAMPA, NICOLE

Provider ID: 316689

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 2185 CITRACADO PKWY

ESCONDIDO, CA 92029

☎ Phone: (442) 281-1008

☎ After Hours Phone: (442) 281-1008

Provider Gender: Female

NPI: 1194488114

☐ 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

🌐 Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

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: No

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

CERTIFIED NURSE PRACTITIONER

JANNESARI, ROYA

Provider ID: 302339

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 625 CITRACADO PKWY STE
108

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D. دليل مقدمي الخدمات المتخصصين

ESCONDIDO, CA 92025
 Phone: (760) 743-1431
Fax: (760) 743-6455
 After Hours Phone: (760) 743-1431
Provider Gender: Female
NPI: 1063585099
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian
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

LINDSEY, SABRINA
Provider ID: 314180
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: 1164860813
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

NAVARRO, STEVEN
Provider ID: 310223
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
Fax: (760) 466-1373
 After Hours Phone: (760) 520-8100
Provider Gender: Male
NPI: 1013598960
 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: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ODONNELL, NICOLE
Provider ID: 314392
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025
 Phone: (833) 867-4642
Fax: (360) 462-2741
 After Hours Phone: (833) 867-4642
Provider Gender: Female
NPI: 1043708456
 Provider 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

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D. دليل مقدمي الخدمات المتخصصين

WALDRUP, LA RHONDA

Provider ID: 299259

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: 1831627181

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, 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\18

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: IHP of Southern Cal-PHP	IPA: Community Care IPA LLC	Board Certified Specialty: No
<u>GASTROENTEROLOGY</u> 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	<u>GASTROENTEROLOGY</u> 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: (619) 345-4055  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: No Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: 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
 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A	<u>HEARING AID DEALER / SUPPLIER</u> ANDERSON, ELAINE Provider ID: 268690	<u>INTERNAL MEDICINE</u> CHEN, ANDREW Provider ID: 296830 Board Certified Specialty: No COMMUNITY CARE IPA LLC  2130 CITRACADO PKWY STE 220 ESCONDIDO, CA 92029  Phone: (760) 743-0546 Fax: (760) 743-8005  After Hours Phone: (760) 743-0546 Provider Gender: Male NPI: 1134357007

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D. دليل مقدمي الخدمات المتخصصين

 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: Yes
COMMUNITY CARE IPA LLC

 2130 CITRACADO PKWY
STE 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 PKWY
STE 220

ESCONDIDO, CA 92029

 Phone: (760) 743-0546

Fax: (760) 317-9769

 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 PKWY
STE 220

ESCONDIDO, CA 92029

 Phone: (760) 743-0546

Fax: (760) 317-9769

 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

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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: Male

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

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

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: Rady Childrens Health

Network, UCSD Medical Group

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, 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: 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

 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,

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

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

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

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, 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

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,
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

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\18

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: 277870

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

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D. دليل مقدمي الخدمات المتخصصين

 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

HAMILTON, ROSS

Provider ID: 311788
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029
 Phone: (760) 631-3000
Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000

Provider Gender: Male
NPI: 1538587852
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, 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-4:30PM

 Website: N/A
IPA: Community Care IPA LLC

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

 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\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

KIM MCMANUS, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

COUNTY, 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

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

OBSTETRICS / GYNECOLOGY

HOFFMAN, MICHAEL

Provider ID: 310393

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

 Phone: (760) 466-9800

Fax: (360) 462-2741

 After Hours Phone: (760)
466-9800

Provider Gender: Male

NPI: 1720047707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ADVENTIST
MEDICAL CENTER

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

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, 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: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

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, PALOMAR MEDICAL

CENTER, 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

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)
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,

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: 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, 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

OPHTHALMOLOGY

MOLL, ANGELA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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,

PALOMAR MEDICAL CENTER,

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

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

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

PALOMAR MEDICAL CENTER,

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

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, 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, UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

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, 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: Rady Childrens Health
Network

OPHTHALMOLOGY

YAMANE, MAYA

Provider ID: 311889

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: 1124580139

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

Website: N/A

IPA: Rady Childrens Health
Network

OPTOMETRIST

AMINI, AFSANEH

Provider ID: 313445

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: 1790099943

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: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPTOMETRIST

AMINI, AFSANEH

Provider ID: 315280

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: 1790099943

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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

DUONG, NGHI

Provider ID: 314753

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: 1285832501

 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: 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,
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

ZAIDI, NOORINA

Provider ID: 310608

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: 1023477262

 Provider 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

FRANK, ETHAN

Provider ID: 310282

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: 1720584345

 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

 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

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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
 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
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

OTOLARYNGOLOGY

QIAN, ZHEN

Provider ID: 311005
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: 1356796783
 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
 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

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: 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

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

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH

Provider ID: 313256

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

294-9260
 Provider Gender: Female
 NPI: 1235634015
 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

SILVA SEPULVEDA, 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, PIONEERS 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 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
 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\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 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:** SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 **Website:** N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL
Provider ID: 311162
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: 1336727791
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSPITAL OF
ORANGE COUNTY, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
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

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
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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

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D. دليل مقدمي الخدمات المتخصصين

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

SHERER, KIMBERLY

Provider ID: 311934

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

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

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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,

SANTA MONICA UCLA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

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

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PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205812

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 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 ENDOCRINOLOGY

RANADIVE, SAYALI

Provider ID: 311398

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: 1588846380

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Hindi,
Marathi, 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-F 8AM-5PM

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

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D. دليل مقدمي الخدمات المتخصصين

 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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

DICKERSON, ANDREW

Provider ID: 310621

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: 1063916633

 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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

LEVY, AVIYA

Provider ID: 310781

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: 1144726936

 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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

BENDER STERN, JULIA

Provider ID: 311586

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 488 E VALLEY PKWY STE 411

ESCONDIDO, CA 92025

 Phone: (760) 466-9800

Fax: (360) 462-2741

 After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1568044691

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

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

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295277
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1955 CITRACADO PKWY
STE 203

ESCONDIDO, CA 92029

 Phone: (760) 738-5533

Fax: (909) 738-3835

 After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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: 275660

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 625 CITRACADO PKWY
ESCONDIDO, CA 92025

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1447645742

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max 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

ABSI, CHRISTIAN

Provider ID: 311840

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (833) 867-4642

Fax: (360) 462-2748

 After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1316652779

 Provider 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

CAMPBELL, PATRICK

Provider ID: 310816

Board Certified Specialty: No
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

Provider Gender: Male

NPI: 1538917125

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 10\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

PHYSICIANS ASSISTANT

FONTANILLA, ROBERT

Provider ID: 315343

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: Male

NPI: 1184005258

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

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

HENNESSY, JAMES

Provider ID: 315245

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: 1801525241

Provider 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

NCHOTU, SUCCESS

Provider ID: 311537

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: 1073157210

Provider 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

NIKAMAL, EVAN

Provider ID: 291250

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8340

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D. دليل مقدمي الخدمات المتخصصين

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

Provider ID: 302456

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: 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\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

WALSH, JOHN

Provider ID: 301971

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: 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

ZATT, DANIELLE

Provider ID: 314765

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: 1578199527

☑ 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-F 8AM-5PM

🌐 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)

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D. دليل مقدمي الخدمات المتخصصين

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

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

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

Network

PSYCHOLOGIST

MORAN, CHRISTINA

Provider ID: 314549
 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: 1063661577
 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,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP,
 Rady Childrens Health
 Network

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

520-8300

Provider Gender: Female

NPI: 1932308442

 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

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\18

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

 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,

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: 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

VAKILIAN, SIAVOSH

Provider ID: 314063

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

 Phone: (760) 839-7370

Fax: (858) 429-7938

 After Hours Phone: (760)

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D. دليل مقدمي الخدمات المتخصصين

839-7370
 Provider Gender: Male
 NPI: 1427456151
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PIONEERS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, 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

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: (760) 839-7370
 Fax: (858) 429-7938
 After Hours Phone: (760)
 839-7370
 Provider Gender: Male
 NPI: 1427456151
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: PIONEERS N
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, 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

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):

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7AM-6PM
 Website: N/A
 IPA: Community Care IPA LLC

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
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7AM-7PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
 Provider ID: 304606

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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, UC SAN DIEGO

HEALTH - EAST CAMPUS

MEDICAL CENTER, 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 GENERAL

VASCULAR

BORJON, AGUSTIN

Provider ID: 315992

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2130 CITRACADO PKWY
STE 300

ESCONDIDO, CA 92029

Phone: (760) 739-7666

Fax: (760) 739-7633

After Hours Phone: (760)
739-7666

Provider Gender: Male

NPI: 1124472311

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

Hours: M-F 8AM-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

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD
MEDICAL CTR, 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: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN

Provider ID: 316058
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: 1487107454
 Provider 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

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

 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 PKWY
STE 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

SHIEH, ALVIN

Provider ID: 316211
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 743-4789
Fax: (858) 485-5071

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 743-4789
 Provider Gender: Male
 NPI: 1316322100
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin
 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-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

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

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
 Website: N/A
 IPA: Rady Childrens Health Network

FALLBROOK

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) 451-4720
 Fax: (760) 457-4700
 After Hours Phone: (760) 451-4720
 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

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206130
 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: 1982775144
 Provider English Spoken: Y
 Cultural Competency: N

SURGERY PEDIATRIC

THOMPSON, KYLE

Provider ID: 310989
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
 Provider Gender: Male
 NPI: 1598147050
 Provider English Spoken: Y
 Provider Language(s) Spoken: French

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D. دليل مقدمي الخدمات المتخصصين

 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

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,
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

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

KIRKLAND, STEPHANIE

Provider ID: 314956

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1083813661

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CHRISTUS
SANTA ROSA MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-2PM
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

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

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

ALLEN, KATHERINE

Provider ID: 315214

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 949 PALM AVE
IMPERIAL BEACH, CA
91932

☎ Phone: (619) 429-3733

Fax: (877) 673-1361

☎ After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1831557024

☑ Provider 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 8AM-7:30PM

W 8AM-5PM

TH 8AM-7:30PM

F 8AM-5PM

SA 8AM-12PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, STEPHANIE

Provider ID: 301310

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA
91932

Phone: (619) 429-3733
Fax: (877) 673-1361

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

LUNA, ABIGAIL

Provider ID: 315817

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA
91932

Phone: (619) 429-3733
Fax: (877) 673-1361

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1366299315

Provider 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 8AM-7:30PM

W 8AM-5PM

TH 8AM-7:30PM

F 8AM-5PM

SA 8AM-12PM

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: (877) 673-1361

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

RAJIV, RENUKA

Provider ID: 315857

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA
91932

Phone: (619) 429-3733
Fax: (877) 673-1361

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1821819301

Provider 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 8AM-7:30PM

W 8AM-5PM

TH 8AM-7:30PM

F 8AM-5PM

SA 8AM-12PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

CAMPOS, PRISCILLA

Provider ID: 316513

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733
Fax: (877) 673-1361

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1508217399

 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 8AM-8PM

TU-W 8AM-5PM

TH 8AM-8PM

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: (877) 673-1361

 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

INTERNAL MEDICINE

PASCUA, RYAN

Provider ID: 312025

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733

Fax: (877) 673-1361

 After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1972064269

 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

HSIEH, STEPHANIE

Provider ID: 312496

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 949 PALM AVE
IMPERIAL BEACH, CA
91932

 Phone: (619) 429-3733

Fax: (877) 673-1361

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1720868045

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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: IHP of Southern Cal-PHP	THERAPIST CHUNG, PETER Provider ID: 314476 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: 1023837887  Provider English Spoken: Y  Provider Language(s) Spoken: Korean Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	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):
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-12PM  Website: N/A IPA: Community Care IPA LLC	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  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: 299890 Board Certified Specialty: No COMMUNITY CARE IPA LLC  600 PALM AVE STE 126 IMPERIAL BEACH, CA	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

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D. دليل مقدمي الخدمات المتخصصين

 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): IHP of Southern Cal-PHP 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

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
 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 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

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126
 IMPERIAL BEACH, CA

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D. دليل مقدمي الخدمات المتخصصين

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

PASCUAL, CHRISTOPHER

Provider ID: 314204

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: Male

NPI: 1093328064

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 10\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM
 F 7AM-5PM
 SA 8AM-2PM

 Website: N/A
 IPA: Community Care IPA LLC

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-12PM
 W-TH 7AM-7PM
 F 7AM-12PM

 Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

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D. دليل مقدمي الخدمات المتخصصين

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

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

REGISTERED PHYSICAL THERAPIST

VAISMAN, SAMANTHA

Provider ID: 311835

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: 1457022071

Provider 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

VERISSIMO, TAYLOR

Provider ID: 310202

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: 1124871629

Provider 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

VILLANUEVA, GIOVANNI

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

ADLER, ERIC

Provider ID: 316009

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (858) 657-8021

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1477699601

Provider English Spoken: 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

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY

Provider ID: 316064

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: 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

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

SILVA ENCISO, JORGE

Provider ID: 316137

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: 1639404031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, PIONEERS

MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL

CENTER, 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

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

TRAN, HAO

Provider ID: 316169

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: 1891997078

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese,
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

Website: N/A

IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

UREY, MARCUS

Provider ID: 316157

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: 1972820058

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

ADVANCED HEART FAILURE AND TRANSPLANT

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D. دليل مقدمي الخدمات المتخصصين

CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 316013

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: 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

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

AL AZZAWI, SARAH

Provider ID: 312974

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1063041887

Provider 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

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

Min/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

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

ANESTHESIOLOGY

BHATIA, KARISHMA

Provider ID: 313007

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: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1932764081

 Provider 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

BIGELOW, ELSIE

Provider ID: 313509

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: 1215565114

 Provider 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

BUI, AN

Provider ID: 316092

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: 1467080341

 Provider 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

CABANISS, SCOTT

Provider ID: 311437

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: 1821626714

 Provider 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

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,

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D. دليل مقدمي الخدمات المتخصصين

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

COBLENTZ, IAN

Provider ID: 311462

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: 1649730367

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 313026

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

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

DARWISH, ALEX

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1043839970

 Provider 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

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

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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

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): UCSD MEDICAL GROUP
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

GARRETT, RILEY

Provider ID: 313741

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: 1740642776

 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

ANESTHESIOLOGY

GOH, REGINE

Provider ID: 311502

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205381316

 Provider 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

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

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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

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241736

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

KAWASAKI, MEGAN

Provider ID: 313584

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: 1073140059

 Provider 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

KIM, ELIZABETH

Provider ID: 313003

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1831726744

 Provider 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

KROL, CAITLIN

Provider ID: 313047

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1518594910

 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

ANESTHESIOLOGY

MALONEY, IAN

Provider ID: 313015

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1508492422

 Provider 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

MEASER, JACQUELINE

Provider ID: 312977

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1790300671

 Provider 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

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

MOELLENHOFF, MICHAEL

Provider ID: 311125

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: 1679584791

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

DOMINICAN SANTA CRUZ

HOSP, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, UC SAN DIEGO HEALTH -

EAST CAMPUS 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

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

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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

SNOW, ERICA

Provider ID: 312988

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1023637808

Provider 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

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

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

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D. دليل مقدمي الخدمات المتخصصين

 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, CORONA 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: 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
 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

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D. دليل مقدمي الخدمات المتخصصين

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

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

ZAERPOOR, DARA

Provider ID: 313028

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1497226450

Provider 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 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, SOUTHWEST

HEALTHCARE INLAND

VALLEY 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: 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

ANESTHESIOLOGY PAIN MANAGEMENT

DEJULIO, PAUL

Provider ID: 316041

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: 1871851154

 Provider 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

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON

Provider ID: 316138

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: 1346516069

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH

Provider ID: 316050

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: 1346470408

 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

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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

CARDIOVASCULAR DISEASE

BIRS, ANTOINETTE

Provider ID: 313049

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1164957957

 Provider 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

CARAZO, MATTHEW

Provider ID: 316171

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: 1952535114

 Provider English 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

CARDIOVASCULAR DISEASE

DAMANI, SAMIR

Provider ID: 310637

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 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

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

DURAN, EDWARD

Provider ID: 316127

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: 1578903936

 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	 Phone: (800) 926-8372  Fax: (888) 539-8781  After Hours Phone: (800) 926-8372 Provider Gender: Male NPI: 1962561571	Min/Max Age: 0\None American Sign Language (ASL): N
<u>CARDIOVASCULAR DISEASE</u> GUPTA, TRIPTI Provider ID: 313715 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: 1306290242	 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	 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group
 Provider 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	<u>CARDIOVASCULAR DISEASE</u> MIZZELL, ANNA Provider ID: 316012 Board Certified Specialty: No UCSD MEDICAL GROUP  9434 MEDICAL CENTER DR LA JOLLA, CA 92037  Phone: (858) 657-8530  Fax: (858) 657-8814  After Hours Phone: (858) 657-8530 Provider Gender: Female NPI: 1851561021	<u>CARDIOVASCULAR DISEASE</u> MIZZELL, ANNA Provider ID: 214021 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: 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
<u>CARDIOVASCULAR DISEASE</u> KEEN, WILLIAM Provider ID: 291303 Board Certified Specialty: No UCSD MEDICAL GROUP  9434 MEDICAL CENTER DR LA JOLLA, CA 92037	 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes	 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group
		<u>CARDIOVASCULAR DISEASE</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

NAREZKINA, ANNA

Provider ID: 316061

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: 1891958773

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, 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

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA

Provider ID: 312912

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 17411

LA JOLLA, CA 92037

Phone: (858) 657-8530

Fax: (858) 657-8814

After Hours Phone: (858)
657-8530

Provider Gender: Female

NPI: 1891958773

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, 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

PHREANER, NICHOLAS

Provider ID: 316170

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: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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

CARDIOVASCULAR DISEASE

TAUB, PAM

Provider ID: 316073

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: 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

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL

Provider ID: 316082

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: 1699063701

 Provider English Spoken: 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

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL

Provider ID: 312909

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: 1699063701

 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 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

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

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

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

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

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

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY

Provider ID: 311065

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1851914220

 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

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY

Provider ID: 311066

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: 1851914220

 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

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY

Provider ID: 311064

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: 1851914220

 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

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):
N

 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

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D. دليل مقدمي الخدمات المتخصصين

 *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: 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

LEE, JIHYUNG

Provider ID: 312191

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: 1073212338

 *Provider 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

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

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

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

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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

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):

 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, 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

CONNER, PAMELA

Provider ID: 299932
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 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

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, 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

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

DAVIES, SUMMER
 Provider ID: 253691
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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, 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,
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

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

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

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 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

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

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

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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1528578713

 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: 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

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

CERTIFIED NURSE PRACTITIONER

GOSHEN, KIRSTEN

Provider ID: 314005

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 9850 GENESEE AVE STE
570

LA JOLLA, CA 92037

 Phone: (858) 457-4917

 After Hours Phone: (858)
457-4917

Provider Gender: Female

NPI: 1447795661

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
 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

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): 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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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: 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

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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

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

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

CERTIFIED NURSE PRACTITIONER

MUNRO, KRISTA

Provider ID: 316143

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: 1407560436

 Provider 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

MUUS, SUSAN

Provider ID: 311126

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: 1295583870

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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): Provider ID: 311128

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN

Provider ID: 311127

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: 1295583870

 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

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN

Provider ID: 311128

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: 1295583870

 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

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

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

PATEL, PRIYA

Provider ID: 316036

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: 1649008772

 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

PATEL, PRIYA

Provider ID: 316035
Board Certified Specialty: No
UCSD MEDICAL GROUP

 **3960 HEALTH SCIENCES
DR
LA JOLLA, CA 92037**
 **Phone:** (800) 926-8273
Fax: (888) 539-8781
 **After Hours Phone:** (800)
 926-8273

Provider Gender: Female
NPI: 1649008772

 **Provider 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

PAULSON, KERRY

Provider ID: 201269
Board Certified Specialty: No
UCSD MEDICAL GROUP

 **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

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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

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL

Provider ID: 312992

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: 1205579141

 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

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

TONG, KIM

Provider ID: 313527

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 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: 1861069874

☑ 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

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

Hospital Affiliation: UCSD
MEDICAL CTR, 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

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

Hospital Affiliation: UCSD
MEDICAL CTR, 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

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

Hospital Affiliation: UCSD
MEDICAL CTR, 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

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

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D. دليل مقدمي الخدمات المتخصصين

 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 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

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

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

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

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

BARSOTTI, ALEXANDRA

Provider ID: 312689

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: 1356100051

 Provider 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

BURROWS, TERENCE

Provider ID: 256695

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: 1023194560

 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

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL

Provider ID: 316037

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: 1942975313

 Provider 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

CONRAD, SIMON

Provider ID: 316111

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: 1952970014

 Provider 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

DAVENPORT, LARIS

Provider ID: 316177

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: 1922699685

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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
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 316025
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: 1336139609
 Provider 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
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
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 311602
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: 1538900154
 Provider 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

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

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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

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

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 REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299906

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: 1083254205

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, 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 REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL

Provider ID: 316129

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: 1053971903

 Provider 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

HOWARD, LANDON

Provider ID: 316172

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: 1578338786

 Provider English Spoken: Y
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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON

Provider ID: 311519

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: 1043059686

 Provider 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

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

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

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 ANESTHETIST

SCOTT, TIFFANY

Provider ID: 312871

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: 1376885186

 Provider English Spoken: Y
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	 9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group
<u>CERTIFIED REGISTERED</u> <u>NURSE ANESTHETIST</u>	Provider Gender: Female NPI: 1366124448	<u>CERTIFIED REGISTERED</u> <u>NURSE ANESTHETIST</u>
TOCCO, JESSICA Provider ID: 312886 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 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	WOODIN, KAREN Provider ID: 310373 Board Certified Specialty: No COMMUNITY CARE IPA LLC  9850 GENESEE AVE STE 440 LA JOLLA, CA 92037  Phone: (616) 361-8292 Fax: (970) 478-8378  After Hours Phone: (616) 361-8292
Provider Gender: Female NPI: 1366836397	<u>CERTIFIED REGISTERED</u> <u>NURSE ANESTHETIST</u>	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	WAKEFIELD, CHANTAL Provider ID: 313051 Board Certified Specialty: No UCSD MEDICAL GROUP  9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (858) 554-1212 Fax: (888) 539-8781  After Hours Phone: (858) 554-1212	 Provider 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	Provider Gender: Female NPI: 1548006141	 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Community Care IPA LLC
<u>CERTIFIED REGISTERED</u> <u>NURSE ANESTHETIST</u>	 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None	<u>CERTIFIED REGISTERED</u> <u>NURSE MIDWIFE</u>
TRAN, HAN Provider ID: 316067 Board Certified Specialty: No UCSD MEDICAL GROUP	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, 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 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
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
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
Hospital Affiliation: 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-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: 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

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-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

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 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

DERMATOLOGY

DANG, TIMOTHY

Provider ID: 312866

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: 1518427913

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

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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

DERMATOLOGY

WONG, HENRY

Provider ID: 313608

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: 1437237567

Provider 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 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1801207006

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, 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

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

CASAS, TAMARA

Provider ID: 313569

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: 1669962270

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

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: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA

Provider ID: 313567

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: 1669962270

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, 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

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287427

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: 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

CHIN, BRIAN

Provider ID: 313571

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: 1770140782

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

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

EMERGENCY MEDICINE

COOK, LEANNE

Provider ID: 313634

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: 1053948687

Provider 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

COOK, LEANNE

Provider ID: 313632

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: 1053948687

Provider 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

CORBETT, BRYAN

Provider ID: 316203

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: 1669762472

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL

CENTER, 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: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN

Provider ID: 316202

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

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D. دليل مقدمي الخدمات المتخصصين

 After Hours Phone: (858) 249-6800

Provider Gender: Male

NPI: 1669762472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL CENTER, 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: UCSD Medical Group

EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 315897

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7600

Fax: (619) 543-3115

 After Hours Phone: (858) 657-7600

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

EAGLE, SONJA

Provider ID: 311504

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: 1699394114

 Provider 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

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
Cultural Competency: N

Hospital Affiliation: PIONEERS 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

EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 301710

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: 1043705296

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
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

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

KRYSHTAFOVYCH, SOLOMIYA

Provider ID: 313021

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: 1801425244

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

LAFREE, ANDREW

Provider ID: 313674

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: 1639437809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, 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

EMERGENCY MEDICINE

LASOFF, DANIEL

Provider ID: 316015

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: 1669730925

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL

CENTER, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

EMERGENCY MEDICINE

LASOFF, DANIEL
 Provider ID: 316014
 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: Male
 NPI: 1669730925
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: EL
 CENTRO REGIONAL MEDICAL
 CENTER, 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: UCSD Medical Group

EMERGENCY MEDICINE

LAVEMAN, EVAN

Provider ID: 313670
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1134654148
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LOS
 ANGELES COUNTY HARBOR
 UCLA MEDICAL CENTER,
 UCSD LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, TEMECULA VALLEY
 HOSPITAL INC
 Medi-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

LAVEMAN, EVAN

Provider ID: 313671
 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: 1134654148
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LOS
 ANGELES COUNTY HARBOR
 UCLA MEDICAL CENTER,
 UCSD LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, TEMECULA VALLEY
 HOSPITAL INC
 Medi-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

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

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, SOUTHWEST
HEALTHCARE INLAND
VALLEY 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: 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, SOUTHWEST

HEALTHCARE INLAND
VALLEY 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: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 283150

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: 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

LIOTTA, BENJAMIN

Provider ID: 313018

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: 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

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIPPI, MATTHEW

Provider ID: 311493
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: 1932736485

 Provider 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

LY, BINH

Provider ID: 316150

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: 1033140843

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, 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: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH

Provider ID: 316149

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: 1033140843

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, 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: UCSD Medical Group

EMERGENCY MEDICINE

MEDAK, ANTHONY

Provider ID: 316011

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 543-6217

 After Hours Phone: (619)
543-6217

Provider Gender: Male

NPI: 1285675116

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, PARADISE

VALLEY HOSPITAL, 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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: 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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1821487430

 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

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
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

SAMHA, LEEN

Provider ID: 313011
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (858) 554-1212
Fax: (888) 539-8781
 After Hours Phone: (858)
554-1212

Provider Gender: Female
NPI: 1992334825
 Provider 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

SAMHA, LEEN

Provider ID: 313009
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 554-1212
Fax: (888) 539-8781
 After Hours Phone: (858)
554-1212

Provider Gender: Female
NPI: 1992334825
 Provider 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

SANDIFORD, PATRICK

Provider ID: 312861
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: 1700151917

 Provider 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

SANDIFORD, PATRICK

Provider ID: 312860

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: 1700151917

 Provider 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

SCHNEIR, AARON

Provider ID: 316156

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: 1467495770

 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

Medi-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

SCHNEIR, AARON

Provider ID: 316155

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: 1467495770

 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

Medi-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

SEGAL, LAUREN

Provider ID: 313709

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1013278431

 Provider 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

SELTZER, JUSTIN

Provider ID: 315888

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 826-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
826-8273

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

SELTZER, JUSTIN

Provider ID: 316163

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: 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

 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

SHISHLOV, KIRILL

Provider ID: 313657

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1114248077

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, 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

EMERGENCY MEDICINE

SLOANE, CHRISTIAN

Provider ID: 315891

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: 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

SMITH, CASEY

Provider ID: 313728

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: 1871099333

 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

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

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

EMERGENCY MEDICINE

SNYDER, BRIAN

Provider ID: 316146

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1538102835
 Provider English Spoken: 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

EMERGENCY MEDICINE

TANAKA, HIDEAKI

Provider ID: 315895
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: 1124280730
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, Sharp Grossmont
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

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN

Provider ID: 315883
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: Male
NPI: 1982629408
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, 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

TOMASZEWSKI, CHRISTIAN

Provider ID: 315884
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: 1982629408
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UCSD LA JOLLA
JOHN SALLY THORNTON
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: UCSD Medical Group

EMERGENCY MEDICINE

TORRES, ERICK

Provider ID: 313619

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: 1548846983

 Provider 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

WARDI, GABRIEL

Provider ID: 316079

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: 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

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

WAYMENT, ANDREW

Provider ID: 313530

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: 1013593839

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: BEAR

VALLEY COMM HOSP,

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

 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
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

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: 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

NPI: 1528564150

 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

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

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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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

DECAMPS, SCARLETT

Provider ID: 311512

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: 1477014611

 Provider 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

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)
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**

PHATAK, SONAL

Provider ID: 316051

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: 1932291119

 **Provider English Spoken:** Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
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**

PHATAK, SONAL

Provider ID: 316052

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: 1932291119

 **Provider English Spoken:** Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
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
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

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

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY

Provider ID: 256953

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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): Provider ID: 313514

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

BRANCH, LAUREL

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: 1912437617

 Provider 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

BRANCH, LAUREL

Provider ID: 313515

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: 1912437617

 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN

Provider ID: 311110

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: 1518048990

 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

CARETHERS, JOHN

Provider ID: 311108

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8440

 After Hours Phone: (858)
657-8440

Provider Gender: Male

NPI: 1518048990

 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

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

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

 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

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

Hospital Affiliation: UCSD
MEDICAL CTR

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-5PM
 Website: N/A
 IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316547
 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: 1093548117

 Provider 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

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316548
 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: 1093548117

 Provider 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

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

KRAUSE, AMANDA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 313629

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: 1528561305

Provider 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

KRAUSE, AMANDA

Provider ID: 313630

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: 1528561305

Provider 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

KUO, SELENA

Provider ID: 313477

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: 1174029821

Provider 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

KUO, SELENA

Provider ID: 313478

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: 1174029821

Provider 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

NOUREDDIN, NABIL

Provider ID: 313613

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: 1972037026

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):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL

Provider ID: 313614

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: 1972037026

 Provider 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

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

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	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	 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
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	 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1265887723  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	 Accessibility: CONTACT PROVIDER  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	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	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,
GASTROENTEROLOGY		
YOUSSEF, FADY	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	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

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D. دليل مقدمي الخدمات المتخصصين

Providence St Jude Medical
Center, ORANGE COAST MEM
MED CTR, CORONA
REGIONAL MED CTR,
CORONA REGIONAL MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR, UCI
HEALTH-FOUNTAIN 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

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM

Provider ID: 313022
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 554-1212
Fax: (888) 539-8781
 After Hours Phone: (858)
554-1212
Provider Gender: Male
NPI: 1548790041
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): **CHANG, JEREMY**

N

 Accessibility: CONTACT
PROVIDER

 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

Provider ID: 314055

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 657-1276

Fax: (888) 539-8781

 After Hours Phone: (858)
657-1276

Provider Gender: Male

NPI: 1699206839

 Provider 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: 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

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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

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
NPI: 1245694801

 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

HEMATOLOGY / ONCOLOGY

CHOI, SHARON

Provider ID: 316121
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: 1790277754

 Provider 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: 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

NPI: 1982995809

 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: SU-SA 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: 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

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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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D. دليل مقدمي الخدمات المتخصصين

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
 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: (619) 543-5415
 After Hours Phone: (619) 543-5415
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	CHILDERS, DIANA Provider ID: 275070 Board Certified Specialty: No UCSD MEDICAL GROUP  9350 CAMPUS POINT DR LA JOLLA, CA 92037	 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1427348382
HOSPITALIST MD/DO	 Phone: (800) 926-8273  Fax: (888) 539-8781	 Provider English Spoken: Y
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	 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	 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	HOSPITALIST MD/DO	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	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: Male NPI: 1033641816  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

HOSPITALIST MD/DO

LE ROUX, MICHELLE

Provider ID: 311568

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: 1144808353

Provider 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

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299947

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, 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,

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

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982018545

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

INTERNAL MEDICINE

BARRIOLA RUBARTH,

RODRIGO

Provider ID: 311571

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: 1336729979

Provider English Spoken: Y
Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

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

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):
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

CHENG, GEORGE

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

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: 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

FEUVRIER, ARIANA

Provider ID: 316160

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: 1548847437

 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

FOX, SUTTON

Provider ID: 313473

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: 1326624008

 Provider 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

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

IBARRA, ALLISON

Provider ID: 312686

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: 1881221273

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D. دليل مقدمي الخدمات المتخصصين

 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

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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

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

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

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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: 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

MARINO, NIKOLAS

Provider ID: 313524

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: 1316523988

Provider 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

NGUYEN, MICHELLE

Provider ID: 311485

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: 1407367618

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

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

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D. دليل مقدمي الخدمات المتخصصين

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

NOVIKOV, YEVGENY

Provider ID: 313731

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: 1144682428

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): SAHA, SRISHTI

N

Accessibility: CONTACT
PROVIDER

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: (619) 543-6397

Fax: (888) 539-8781

After Hours Phone: (619)
543-6397

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

INTERNAL MEDICINE

Provider ID: 316142

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: 1114554714

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

SEBASKY, MEGHAN

Provider ID: 273963

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 471-9186

After Hours Phone: (619)
471-9186

Provider Gender: Female

NPI: 1538351408

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: 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

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

SIRIPHAND, CHRISTOPHER

Provider ID: 311446

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: 1891258596

 Provider English Spoken: Y

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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

WONG, JUSTIN

Provider ID: 313598
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: 1740869387

 Provider 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

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

 Provider English 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

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D. دليل مقدمي الخدمات المتخصصين

CRITICAL CARE MEDICINE

BARNES, LAURA

Provider ID: 312183

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: 1558749242

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, 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: 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

DEWOLF, SEAN

Provider ID: 311454

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: 1518312230

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KINDRED
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: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

HEPOKOSKI, MARK

Provider ID: 311547

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (855) 355-5864

After Hours Phone: (855)
355-5864

Provider Gender: Male

NPI: 1649408790

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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

IBRAHIM, ISLAM

Provider ID: 311488

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7125

Fax: (858) 822-5338

After Hours Phone: (858)
657-7125

Provider Gender: Male

NPI: 1962586917

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, LONG BEACH
MEMORIAL MED CTR,
TEMECULA VALLEY HOSPITAL
INC, SOUTHWEST
HEALTHCARE INLAND
VALLEY 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: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

JOHN, MIRA

Provider ID: 311592

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: 1013448588

Provider 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

KAMDAR, BIREN

Provider ID: 311451

Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (855) 355-5864

After Hours Phone: (855)
355-5864

Provider Gender: Male

NPI: 1528115417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SANTA
MONICA UCLA MED CTR,
RONALD REAGAN 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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LI, JINGHONG

Provider ID: 316097

Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR

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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: 1619014479
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, 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: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

LIN, CHRISTINE

Provider ID: 311560
 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: 1699979591
 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

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

PAGE, BRADY

Provider ID: 313676
 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: 1528557550
 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

INTERNAL MEDICINE CRITICAL CARE MEDICINE

TRAN, LINH

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D. دليل مقدمي الخدمات المتخصصين

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 THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, 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

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 316063

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: 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
 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

ANG, LAWRENCE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 316098

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: 1851529879

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

INTERVENTIONAL CARDIOLOGY

BUI, QUAN

Provider ID: 310077

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: 1831553718

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

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, 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

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

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE

Provider ID: 311130

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: 1285089805

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

INTERVENTIONAL CARDIOLOGY

MA, JANET

Provider ID: 311578

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: 1922454396

Provider English 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

INTERVENTIONAL CARDIOLOGY

MA, GARY

Provider ID: 313302

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: Male

NPI: 1437503208

Provider English Spoken: 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

INTERVENTIONAL CARDIOLOGY

REEVES, RYAN

Provider ID: 316081

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: 1548440902

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):

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D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group	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
<u>INTERVENTIONAL</u> <u>CARDIOLOGY</u> SORIA JIMENEZ, CESAR Provider ID: 311092 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: 1851826713  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	 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	 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
<u>INTERVENTIONAL</u> <u>CARDIOLOGY</u> TAUB, PAM Provider ID: 277681	<u>INTERVENTIONAL</u> <u>CARDIOLOGY</u> 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	<u>INTERVENTIONAL</u> <u>CARDIOLOGY</u> TORRES BARBA, DAVID Provider ID: 316197 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: 1447612676  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, UCSD MEDICAL CTR,
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

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

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, 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: 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

Hospital Affiliation: PALOMAR

MEDICAL CENTER, 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

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, 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

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,

SOUTHWEST HEALTHCARE

INLAND VALLEY 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: Rady Childrens Health

Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING

Provider ID: 312715

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: 1265686794

Provider 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

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 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,
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, 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: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

DEL ROSARIO, 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, SOUTHWEST

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D. دليل مقدمي الخدمات المتخصصين

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: 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

MATOKA, 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, 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

NEONATAL / PERINATAL MEDICINE

MATOKA, 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, 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

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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)
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, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

PHAM, BETTY

Provider ID: 310311

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: Female

NPI: 1790217750

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

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\None

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: 303907

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

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D. دليل مقدمي الخدمات المتخصصين

 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, 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

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
 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, 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

NEPHROLOGY

RIFKIN, DENA

Provider ID: 311022

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: 1578519203

 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

NEPHROLOGY

RIFKIN, DENA

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 311023

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: 1578519203

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

NEPHROLOGY

SANCHEZ, AMBER

Provider ID: 311155

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: 1700963907

Provider English Spoken: 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

NEPHROLOGY

SANCHEZ, AMBER

Provider ID: 311156

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: 1700963907

Provider English Spoken: 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

NEPHROLOGY

SANCHEZ, AMBER

Provider ID: 311157

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: 1700963907

Provider English Spoken: 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

NEPHROLOGY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SINGH, PRABHLEEN

Provider ID: 311034

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: 1235207234

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Punjabi

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

NEPHROLOGY

SINGH, PRABHLEEN

Provider ID: 311035

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: 1235207234

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Punjabi

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

GHOLOPOUR, TAHA

Provider ID: 311497

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: 1801159611

Provider English Spoken: Y

Provider Language(s)

Spoken: French, Persian

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

HAMILTON, ROSS

Provider ID: 311789

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Phone: (760) 631-3000

Fax: (760) 631-3007

After Hours Phone: (760)
631-3000

Provider Gender: Male

NPI: 1538587852

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC

NEUROLOGY

ILICETO, ALESSANDRO

Provider ID: 313505

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: 1831685577

 Provider 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

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, 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

JACQUES, KAYLA

Provider ID: 311187

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: 1538622014

 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

KANSAL, LEENA

Provider ID: 311522

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (585) 657-8540

 After Hours Phone: (585) 657-8540

Provider Gender: Female

NPI: 1871759084

 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

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D. دليل مقدمي الخدمات المتخصصين

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

MAHTA, ALI

Provider ID: 314333
 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: 1437387990

 Provider 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

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
 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

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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
 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): IPA: UCSD Medical Group
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 311471
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: 1790774156

 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

NEUROLOGY

TECOMA, EVELYN
Provider ID: 311534
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: Female
NPI: 1174556518
 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

UNG, HOAMENG
Provider ID: 311434
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: Male

NPI: 1619438363

☐ 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

WU, VICTORIA

Provider ID: 313038

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: 1649833039

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSF MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM

Provider ID: 314374

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: 1528172996

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic, French

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

NUCLEAR MEDICINE

CHEHABI, HAZEM

Provider ID: 314375

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1528172996

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic, French

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

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

Provider ID: 311194

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: 1790149425

☐ 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: 16\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

Provider ID: 311195

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: 1790149425

 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

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCore, LAURA

Provider ID: 291324

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, 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

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, 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

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, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

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, 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

FERRANDO, CECILE

Provider ID: 311106

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: 1255592325

 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

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE

Provider ID: 311104

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: 1255592325

 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

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN

Provider ID: 313592

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: 1427686930

 Provider 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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D. دليل مقدمي الخدمات المتخصصين

OBSTETRICS / GYNECOLOGY

GREINER, KAREN

Provider ID: 313594

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: 1427686930

Provider 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

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

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

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, EISENHOWER MEDICAL

CTR, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

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: 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

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

MCKINNEY, SARA

Provider ID: 311117
 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: 1558708297

 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
 Website: N/A
 IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA

Provider ID: 311118
 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: 1558708297

 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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 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 MELLENDEZ, 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 Hospital Affiliation: 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 NUTAITIS, ALEXANDRA Provider ID: 313547 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: 1548897770  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
 Website: N/A
 IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PENALOSA, PATRICK

Provider ID: 313494
 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: 1558998914

 Provider 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

OBSTETRICS / GYNECOLOGY

PENALOSA, PATRICK

Provider ID: 313493
 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: 1558998914

 Provider 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

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: 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

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

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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: 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

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285173

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: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS

SINAI MEDICAL CENTER,
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: 16\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

FARBER, 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

LIPARI, RACHEL

Provider ID: 311102

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: 1578129904

 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

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR

Provider ID: 288724

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: 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

PARKER, LESLIE

Provider ID: 311354

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: 1053143875

 Provider English Spoken: Y
Cultural Competency: N

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): Provider ID: 315302

N

 Accessibility: CONTACT PROVIDER

 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

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

OPHTHALMOLOGY

ALLEN, RACHAEL

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: 1801275391

 Provider 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

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

CHENG, SARAH

Provider ID: 313680

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: 1568995397

 Provider 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

 Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313682
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: 1568995397

 Provider 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

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313683
Board Certified Specialty: No
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1568995397

 Provider 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

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313684
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: Female
NPI: 1568995397

 Provider 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

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER

Provider ID: 313495
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: 1891730073

 Provider 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

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER

Provider ID: 313497
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: 1891730073

 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
 Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 313498
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: 1891730073
 Provider 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

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 313717

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: 1982232542
 Provider 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

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 313718
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: 1982232542
 Provider 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

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 313692
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: 1952927584
 Provider 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

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 313693
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1952927584
 Provider 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

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, 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: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 311100
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: 1174152961
 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

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 311101
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: 1174152961
 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

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 313537
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1124641071

 Provider 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

OPHTHALMOLOGY

PETERSON, JONATHAN

Provider ID: 313538

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: 1124641071

 Provider 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

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, 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

OPHTHALMOLOGY

VAIL, DANIEL

Provider ID: 313580

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: 1285262568

 Provider 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

OPHTHALMOLOGY

VAIL, DANIEL

Provider ID: 313581

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: 1285262568

 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

OPTOMETRIST

DUONG, NGHI

Provider ID: 314751

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: 1285832501

 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: 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

 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

HOO, PAMELA

Provider ID: 316410

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 9415 CAMPUS POINT DR
STE 1

LA JOLLA, CA 92093

 Phone: (858) 534-6290

Fax: (858) 822-4438

 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

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): UCSD MEDICAL GROUP

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

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

KIM, PHILIP

Provider ID: 287909

Board Certified Specialty: No

 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

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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 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

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: 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

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: 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

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: 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

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

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

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

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

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

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

Hospital Affiliation: 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  Website: N/A IPA: UCSD Medical Group	UCSD MEDICAL GROUP  9350 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (800) 926-8273  Fax: (888) 539-8781	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
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	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	 Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group
OTOLARYNGOLOGY		
COFFEY, CHARLES Provider ID: 299581 Board Certified Specialty: No	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	OTOLARYNGOLOGY COFFEY, CHARLES Provider ID: 299584 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: 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
OTOLARYNGOLOGY		
COFFEY, CHARLES Provider ID: 299581 Board Certified Specialty: No	 Provider English Spoken: Y	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

DECONDE, ADAM

Provider ID: 299570
 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: 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: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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 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	Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1144583931 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	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	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) 926-8273 Provider Gender: Female NPI: 1144583931 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None	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 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 HARRIS, JEFFREY Provider ID: 299578

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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: 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: 299516

Board Certified Specialty: No

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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: 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: 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

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 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

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D. دليل مقدمي الخدمات المتخصصين

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: 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

WHITTIER HOSPITAL, 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: 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

WHITTIER HOSPITAL, 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

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, 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	ANGELES, PIH HEALTH WHITTIER HOSPITAL, 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	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 WHITTIER HOSPITAL, UCSD LA	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 WHITTIER HOSPITAL, UCSD LA	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  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, PIONEERS 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 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: 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,
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: 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,
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: 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,
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: 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1669630653
 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

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
 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

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
 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

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
 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

PEREZ, ANGEL
 Provider ID: 313031
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (858) 554-1212
 Fax: (888) 539-8781
 After Hours Phone: (858)
 554-1212

Provider Gender: Male
 NPI: 1881841971
 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): IPA: UCSD Medical Group

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): IPA: UCSD Medical Group

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): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

ANDREW

Provider ID: 299506

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): IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

WATSON, DEBORAH
 Provider ID: 299643
 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: 1346270816
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS GREEN 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

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, 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: 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, 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

WATSON, DEBORAH
 Provider ID: 299640

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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, 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

WEISSBROD, PHILIP

Provider ID: 299612

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: 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: 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: 299613

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

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

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

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

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

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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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Medi-Cal Open Panel: Yes
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

American Sign Language (ASL): Medi-Cal Open Panel: Yes
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

American Sign Language (ASL): Medi-Cal Open Panel: Yes
Min/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: 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

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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

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: 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):

 **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

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)**

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D. دليل مقدمي الخدمات المتخصصين

Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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, 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

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
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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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D. دليل مقدمي الخدمات المتخصصين

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 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):
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

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PEDIATRIC 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,

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D. دليل مقدمي الخدمات المتخصصين

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): Min/Max Age: 0\18

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 315886

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: 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, UCSD MEDICAL
CTR

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

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON

Provider ID: 312986

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: 1689036436

 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, 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

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D. دليل مقدمي الخدمات المتخصصين

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 NPI: 1730605486 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP, 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	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	Medi-Cal Open Panel: Yes Min/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: 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	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, UCSD MEDICAL CTR	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

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D. دليل مقدمي الخدمات المتخصصين

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

Provider English 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

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

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, SCRIPPS

MEMORIAL 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
 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
 Provider Gender: Male
 NPI: 1467926295
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, 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

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
 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

GEBAUER, HEATHER

Provider ID: 311551
 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: 1467987586

 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
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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: 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

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
 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

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
 Hospital Affiliation: UCSD
 MEDICAL CTR

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

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

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: 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

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

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

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D. دليل مقدمي الخدمات المتخصصين

 *Provider Language(s)*
Spoken: Spanish,
Vietnamese

Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  3855 HEALTH SCIENCES
DR

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUU, JACKIE

Provider ID: 316181

*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: 1689103749

 *Provider 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: 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

*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

PHYSICIANS ASSISTANT

MARTIN, HALEY

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

*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

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

*Hospital Affiliation: UCSD
MEDICAL CTR*

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

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

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

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

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

NPI: 1497129860

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Japanese

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

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

PERREAULT, 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

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

PERREAULT, 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

NPI: 1356749451

 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

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D. دليل مقدمي الخدمات المتخصصين

 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, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PHYSICIANS ASSISTANT	PHYSICIANS ASSISTANT	PHYSICIANS ASSISTANT
SERHAN, STEPHANIE Provider ID: 312858 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: 1487438750 🗣 Provider 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	SMITH, TREVOR Provider ID: 313667 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: 1821573718 🗣 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	SMITH, TREVOR Provider ID: 313668 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: 1821573718 🗣 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
PHYSICIANS ASSISTANT	PHYSICIANS ASSISTANT	PHYSICIANS ASSISTANT
SMITH, TREVOR Provider ID: 313666 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: 1821573718 🗣 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	SMITH, TREVOR Provider ID: 313667 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: 1821573718 🗣 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	TAN, CARMELA Provider ID: 311090 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1811069271

 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

PHYSICIANS ASSISTANT

THOMAS, THEA

Provider ID: 312696
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: 1457718843

 Provider 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

THOMAS, THEA

Provider ID: 312697
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: 1457718843

 Provider 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
 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
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

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
Hospital Affiliation: 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

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
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

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

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

 **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

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
Hospital Affiliation: UCSD MEDICAL CTR

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

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

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

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
 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	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: 1013483635  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 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 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 Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes
PSYCHOLOGIST LASSWELL, EVE Provider ID: 208260		

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

PSYCHOLOGIST

THOMAS, KELSEY

Provider ID: 311589

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: 1700264264

 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

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

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

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

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D. دليل مقدمي الخدمات المتخصصين

 **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
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

PULMONARY DISEASES

CYPRO, ALEXANDER

Provider ID: 313678
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: 1881126936

 **Provider 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

HOGAN, NICHOLAS

Provider ID: 313712

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: 1861925273

 **Provider English Spoken:** Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, 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

 **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

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IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS

Provider ID: 313305

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: 1407388564

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, 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

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, 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

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

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

RADIATION ONCOLOGY

GURAM, KRIPA

Provider ID: 316166

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: 1003377391

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

RADIATION ONCOLOGY

GURAM, KRIPA

Provider ID: 316165
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 3960 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1003377391

 Provider 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

HOPPER, AUSTIN

Provider ID: 313012
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 3960 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92037

 Phone: (858) 554-1212
 Fax: (888) 539-8781

 After Hours Phone: (858)
 554-1212

Provider Gender: Male

NPI: 1306308721

 Provider 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

HOPPER, AUSTIN

Provider ID: 313013
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92093

 Phone: (858) 554-1212
 Fax: (888) 539-8781

 After Hours Phone: (858)
 554-1212

Provider Gender: Male

NPI: 1306308721

 Provider 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

LUI, ASONA

Provider ID: 311439
 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: 1104487446

 Provider 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

LUI, ASONA

Provider ID: 311440
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 3960 HEALTH SCIENCES
 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 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

LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1104487446
 Provider 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

ADAMS, STEPHEN
 Provider ID: 311198
 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: 1376689778
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UC DAVIS
 MEDICAL CTR, Highland
 Hospital, Alameda Hospital,
 SAN LEANDRO 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

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
 Provider ID: 311086
 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: 1811158967
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UC DAVIS
 MEDICAL CTR, 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

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, 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

BISSET, LOGAN
 Provider ID: 311145
 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: 1356760276

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD MEDICAL
CTR, KERN 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

BLACKWELL, CHRISTOPHER

Provider ID: 313486

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: 1740740125

☑ Provider 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

BLACKWELL, CHRISTOPHER

Provider ID: 313487

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: 1740740125

☑ Provider 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

BONE, SAMUEL

Provider ID: 311167

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: 1841216306

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GEORGE L
MEE MEMORIAL HOSP, UC
DAVIS MEDICAL CTR, 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

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

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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

RADIOLOGY DIAGNOSTIC

BROWN, TERESA

Provider ID: 311081

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: 1669492237

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SAN

LEANDRO HOSPITAL,

Highland Hospital, Alameda

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

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE

Provider ID: 311136

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: 1548249956

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Eisenhower
Medical Center, 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

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,
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

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

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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

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA

Provider ID: 313645

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: 1578079786

 Provider 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

CHRISTENSEN, DIANA

Provider ID: 313646

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: 1578079786

 Provider 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

CIRIELLO, JONATHAN

Provider ID: 313502

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: 1720540743

 Provider 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

CIRIELLO, JONATHAN

Provider ID: 313503

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: 1720540743

 Provider 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

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D. دليل مقدمي الخدمات المتخصصين

CRAMER, SCOTT

Provider ID: 313576

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: 1598225740

Provider 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

CRAMER, SCOTT

Provider ID: 313577

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: 1598225740

Provider 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: 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

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

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

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Providence Mission 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

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)

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D. دليل مقدمي الخدمات المتخصصين

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

GERST, SCOTT

Provider ID: 311149

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: 1184602872

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, KERN 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

GORDON, EMILE

Provider ID: 311596

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: 1184121899

 Provider 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

GORDON, EMILE

Provider ID: 311597

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: 1184121899

 Provider 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

GRISSOM, MURRAY

Provider ID: 271568

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: 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

HANSCH, ERNST

Provider ID: 311122

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: 1366428351

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY HOSPITAL OF
THE MONTEREY PENINSULA,

MOUNTAINS COMMUNITY

HOSP, EISENHOWER

MEDICAL CTR, UCSD MEDICAL
CTR, KERN 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

HELMY, MARWAH

Provider ID: 311097

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: 1841276730

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: DOCTORS
MEDICAL CENTER, Providence

St Jude Medical Center,

Parkview Community Hospital

Medical Center, ST

BERNARDINE MED CTR,

COMMUNITY HOSP OF SAN

BERNARDINO, KINDRED

HOSPITAL ONTARIO,

DAMERON HOSPITAL ASSOC,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

DAMERON HOSPITAL ASSOC,
ST JOSEPHS MEDICAL
CENTER, MARK TWAIN
MEDICAL CENTER, 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

RADIOLOGY DIAGNOSTIC

HENNEMEYER, CHARLES

Provider ID: 312881

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: 1548209539

 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

RADIOLOGY DIAGNOSTIC

HENNEMEYER, CHARLES

Provider ID: 312882

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: 1548209539

 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

RADIOLOGY DIAGNOSTIC

HURT, BRIAN

Provider ID: 313602

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: 1306370465

 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

HURT, BRIAN

Provider ID: 313603

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: 1306370465

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER 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

 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, 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

KAKISH, DAVID

Provider ID: 313589

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: 1588123863

 Provider 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

KAKISH, DAVID

Provider ID: 313590

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: 1588123863

 Provider 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: 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

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

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 312890

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: 1427496710

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

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

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: 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

LIM, GARRETT

Provider ID: 313543

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: 1396233565

Provider 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

LIM, GARRETT

Provider ID: 313544

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: 1396233565

Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1952389934

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER, 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

PANZARINI, BRUNO

Provider ID: 313777

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: 1649776915

 Provider 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

PANZARINI, BRUNO

Provider ID: 313778

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: 1649776915

 Provider 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

POHLEN, MICHAEL

Provider ID: 313559

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: 1285130906

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD

CHILDRENS HOSP, Stanford
Health Care, 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

POHLEN, MICHAEL

Provider ID: 313560

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: 1285130906

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD

CHILDRENS HOSP, Stanford

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D. دليل مقدمي الخدمات المتخصصين

Health Care, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Min/Max Age: 0\None

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER

Provider ID: 311170

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: 1497759898

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence

St Joseph Hospital, SUTTER

COAST HOSPITAL, SUTTER

LAKESIDE HOSP, SUTTER

MATERNITY AND SURGERY

CENTER OF SANTA CRUZ,

MEMORIAL HOSPITAL MED

CTR, EISENHOWER MEDICAL

CTR, Alameda Hospital,

Alameda Hospital, Highland

Hospital, SAN LEANDRO

HOSPITAL, SAN LEANDRO

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

ROBINSON, ADAM

Provider ID: 313699

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: 1730685611

 Provider 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

ROBINSON, ADAM

Provider ID: 313700

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: 1730685611

 Provider 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

ROTMAN, YONATAN

Provider ID: 313554

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: 1326542341

 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
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN

Provider ID: 313555
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: 1326542341

 Provider 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

ROZELL, JOSEPH

Provider ID: 311180

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: 1629368519

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR,
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

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
Hospital Affiliation: CITY OF
HOPE NATIONAL MED CTR,
UCSD MEDICAL CTR, MAD
RIVER COMM HOSPITAL,
MOUNTAINS 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

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
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): Board Certified Specialty: No
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

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

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR

Provider ID: 313564

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: 1487117826

 Provider 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

SHWAIKI, OMAR

Provider ID: 313565

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: 1487117826

 Provider 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

RADIOLOGY DIAGNOSTIC SPARKS, CHELSEA Provider ID: 313625 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: 1366901662 Provider 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	NPI: 1366901662 Provider 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	PROVIDER Website: N/A IPA: UCSD Medical Group
RADIOLOGY DIAGNOSTIC SPARKS, CHELSEA Provider ID: 313626 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	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, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	RADIOLOGY DIAGNOSTIC SPENGLER, NATHAN Provider ID: 312877 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: 1992919666 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, 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 STEPENOSKY, JAMES Provider ID: 309704 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: Male NPI: 1598738577  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	THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, 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: UCSD Medical Group	THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT 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		
SUN, ALEX Provider ID: 311563 Board Certified Specialty: No UCSD MEDICAL GROUP  9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (858) 657-6641  After Hours Phone: (858) 657-6641 Provider Gender: Male NPI: 1538502331  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY	SUN, ALEX Provider ID: 311566 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: 1538502331  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY	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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

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

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE

Provider ID: 313707

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: 1013440965

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, 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

WELSH, RAYMOND

Provider ID: 314370

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: 1932370384

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GEORGE L
MEE MEMORIAL HOSP, UC
DAVIS 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

YIN, JANE

Provider ID: 313640

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: 1477014405

 Provider 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

YIN, JANE

Provider ID: 313641

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: 1477014405

 Provider 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: 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

BALL, STEPHEN

Provider ID: 311014

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: 1437644044

 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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D. دليل مقدمي الخدمات المتخصصين

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

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

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

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

BOEHMER, ALEXANDRA

Provider ID: 311059

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: 1528789856

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

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

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

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

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

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

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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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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

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

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

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288938

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: 1164979837

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

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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, 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 COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286388

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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 284408

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

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

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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 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

BORTZ, PASCAL

Provider ID: 313995

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 9850 GENESEE AVE STE 570

LA JOLLA, CA 92037

 Phone: (858) 457-4917

 After Hours Phone: (858) 457-4917

Provider Gender: Male

NPI: 1821330796

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL 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 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

HOLLANDSWORTH, HANNAH

Provider ID: 310728

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: Female

NPI: 1972954303

Provider English 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 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
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

SIMEONE, DIANE

Provider ID: 311176

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 1215038138

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

SURGERY GENERAL

VASCULAR

GAFFEY, ANN

Provider ID: 287012

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: 1316232010

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA 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

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 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, UCSD MEDICAL CTR, 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: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN

Provider ID: 316059
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: 1487107454
 Provider 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

KHANNA, ARJUN

Provider ID: 311543
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1780079954

 Provider 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

KHANNA, ARJUN

Provider ID: 311542
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: 1780079954
 Provider 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

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
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 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
Hospital Affiliation: UCSD
MEDICAL CTR, 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: 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
Hospital Affiliation: UCSD
MEDICAL CTR, 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): Provider ID: 242006

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

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, 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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

Provider ID: 313621

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: 1902369366

 Provider 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

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 ORTHOPEDIC

BOCKHORN, LAUREN

Provider ID: 313620

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: 1902369366

 Provider 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

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

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

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

 Provider English 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

CORTES, ALEJANDRO

Provider ID: 313518
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: 1972066785

 Provider 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

CORTES, ALEJANDRO

Provider ID: 313519
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: 1972066785

 Provider 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

DIJANIC, CHRISTOPHER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 313480

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: 1295396281

Provider 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

DIJANIC, CHRISTOPHER

Provider ID: 313481

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: 1295396281

Provider 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

DWIGHT, KATHRYN

Provider ID: 316033

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: 1548797103

Provider 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

DWIGHT, KATHRYN

Provider ID: 316032

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: 1548797103

Provider 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

GEORGE, JOSE

Provider ID: 313605

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: 1528528668

Provider English Spoken: Y
Cultural Competency: N

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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GEORGE, JOSE

Provider ID: 313606
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: 1528528668
Provider 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

GOEB, YANNICK

Provider ID: 284793
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: 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: 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

HURVITZ, ANDREW

Provider ID: 311581
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: 1083842371
Provider English Spoken: Y
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	 Phone: (800) 926-8273  Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1144783028	PROVIDER  Website: N/A IPA: UCSD Medical Group
<u>SURGERY ORTHOPEDIC</u>	 Provider English Spoken: Y	<u>SURGERY ORTHOPEDIC</u>
PASSIAS, BRADEN Provider ID: 313510 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: 1144783028  Provider 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	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	SEDGHI, SOUDABEH Provider ID: 313491 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: 1619438199  Provider 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
<u>SURGERY ORTHOPEDIC</u>	<u>SURGERY ORTHOPEDIC</u>	<u>SURGERY ORTHOPEDIC</u>
PASSIAS, BRADEN Provider ID: 313511 Board Certified Specialty: No UCSD MEDICAL GROUP  9400 CAMPUS POINT DR LA JOLLA, CA 92093	SEDGHI, SOUDABEH Provider ID: 313490 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: 1619438199  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT	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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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: 285245

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 657-8200

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8200

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 PLASTIC

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

 Provider English Spoken: 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 THORACIC

BOYS, JOSHUA

Provider ID: 243533

Board Certified Specialty: No
UCSD MEDICAL GROUP

 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, 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

SURGERY THORACIC

HOWE, STEVEN

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 316122

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: 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

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: 316139

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: 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

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

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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 THORACIC

POLLEMA, TRAVIS

Provider ID: 316144

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: 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

 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

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: 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)

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D. دليل مقدمي الخدمات المتخصصين

926-8273
 Provider Gender: Female
 NPI: 1780940031
 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

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
 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

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
 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

UROLOGY

BAGRODIA, ADITYA
 Provider ID: 286165
 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: Male
 NPI: 1730310665
 Provider English 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

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

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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
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

UROLOGY

GRIFFITHS, LUKE

Provider ID: 311498
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: 1760945836
 Provider 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

KADER, ANDREW

Provider ID: 316152
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: 1184731127

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
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

UROLOGY

KANE, CHRISTOPHER

Provider ID: 312867
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: Male
NPI: 1083636294

 Provider English Spoken: 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

UROLOGY

MOORE, SARAH

Provider ID: 311609
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: 1538620760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

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D. دليل مقدمي الخدمات المتخصصين

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

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
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:
GROSSMONT HOSPITAL, UC
SAN DIEGO HEALTH - EAST

CAMPUS 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

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, UC
SAN DIEGO HEALTH - EAST
CAMPUS MEDICAL 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
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, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY

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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL CHULA VISTA,
Sharp Grossmont Hospital, UC
SAN DIEGO HEALTH - EAST
CAMPUS MEDICAL CENTER,
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

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

 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

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268693

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

HOSPITALIST MD/DO

DUBE, AMANDA

Provider ID: 311744

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (619) 740-6000

Fax: (619) 740-4885

 After Hours Phone: (619)
740-6000

Provider Gender: Female

NPI: 1710407531

 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

 Website: N/A

IPA: Rady Childrens Health
Network

HOSPITALIST MD/DO

KUPELIAN, CHLOE

Provider ID: 310786

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 5555 GROSSMONT
CENTER DR
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) 740-6000
Fax: (619) 740-4885

 After Hours Phone: (619) 740-6000

Provider Gender: Female

NPI: 1780013748

 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
IPA: Community Care IPA LLC

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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, UC
SAN DIEGO HEALTH - EAST
CAMPUS 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

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, USC
Arcadia Hospital, UC SAN
DIEGO HEALTH - EAST

CAMPUS 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

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, 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): Min/Max Age: 0\18

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

INLAND VALLEY HOSPITAL

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: Rady Childrens Health

Network, UCSD Medical Group

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: 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,
SOUTHWEST HEALTHCARE

MATERNAL AND FETAL MEDICINE

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, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294654

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: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND
VALLEY 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
 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

SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277317
 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: Male
 NPI: 1154305977

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18

American Sign Language (ASL): N
 Grossmont Hospital, Sharp Grossmont Hospital,

MATERNAL AND FETAL MEDICINE

SCHWENDEMAN, WADE

Provider ID: 277305
 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: 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,

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BARNARD, LUKE

Provider ID: 310548

Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP

 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942

 Phone: (619) 465-2020
 Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Provider Gender: Male
 NPI: 1710543111

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: 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-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE

Provider ID: 311673
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619)
 465-2020
 Provider Gender: Male
 NPI: 1710543111

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: 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,
 IHP of Southern Cal-PHP

OPHTHALMOLOGY

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
 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

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
 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

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297578

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D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7339 EL CAJON BLVD STE J

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

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

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 312357

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

7339 EL CAJON BLVD STE J

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

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

OTOLARYNGOLOGY

MOSHTAGHI, OMID

Provider ID: 302380

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT CENTER DR 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

MOSHTAGHI, OMID

Provider ID: 312373

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT CENTER DR STE 101

LA MESA, CA 91942

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619)

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D. دليل مقدمي الخدمات المتخصصين

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

SAID, MENA
 Provider ID: 311787
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT
 CENTER DR STE 101
 LA MESA, CA 91942
 Phone: (619) 464-3353
 Fax: (619) 464-6720
 After Hours Phone: (619)
 464-3353
 Provider Gender: Male
 NPI: 1053859678
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital, SHARP
 CHULA VISTA MED CTR

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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):
 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: 308213
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 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):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

PODIATRIST

TRAN, HEATHER
 Provider ID: 314735
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 5565 GROSSMONT
 CENTER DR STE 3
 LA MESA, CA 91942
 Phone: (619) 303-7130
 Fax: (619) 303-7150
 After Hours Phone: (619)

303-7130
 Provider Gender: Female
 NPI: 1124643564
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont 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 9AM-5PM
 Website: N/A
 IPA: 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)

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D. دليل مقدمي الخدمات المتخصصين

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
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

LAKESIDE

CHIROPRACTOR

FIGUEROA, CHRISTOPHER

Provider ID: 312181
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: Male
NPI: 1487323119
 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

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

MENIFEE

PHYSICIANS ASSISTANT

SMITH, KELLI

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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
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, 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

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

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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

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: No

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

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-12PM
M-F 8AM-5PM

SA 8:30AM-12PM

 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

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D. دليل مقدمي الخدمات المتخصصين

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
IPA: UCSD Medical Group

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,

SOUTHWEST HEALTHCARE

INLAND VALLEY 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

EMERGENCY MEDICINE

CASAS, TAMARA

Provider ID: 311939
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: 1669962270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

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

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
After Hours Phone: (951)
696-6000
Provider Gender: Female
NPI: 1619014479
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, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CTR, SOUTHWEST
HEALTHCARE INLAND
VALLEY 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: 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,

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

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

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D. دليل مقدمي الخدمات المتخصصين

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	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	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
INTERNAL MEDICINE CRITICAL CARE MEDICINE	INTERVENTIONAL CARDIOLOGY	INTERVENTIONAL CARDIOLOGY
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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL	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	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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296988
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 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,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL
 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: Rady Childrens Health
 Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296992
 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: 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,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL
 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: Rady Childrens Health
 Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294649
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 25170 HANCOCK AVE FL 1
 MURRIETA, CA 92562
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
 966-6710
 Provider Gender: Female
 NPI: 1801207634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SOUTHWEST
 HEALTHCARE INLAND
 VALLEY 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: Rady Childrens Health Network

IPA: Rady Childrens Health Network

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, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL

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

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, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

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, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\18

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

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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

NEUROLOGY CHILD

KIM MCMANUS, 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

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

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, PALOMAR MEDICAL
CENTER, 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

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

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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL SAN DIEGO,
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: Rady Childrens Health
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, UCSD MEDICAL CTR,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Min/Max Age: 0\19

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,
PALOMAR MEDICAL CENTER,
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

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, 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

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D. دليل مقدمي الخدمات المتخصصين

 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

Provider Gender: Male
NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, 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: Rady Childrens Health
Network

OPHTHALMOLOGY

YAMANE, MAYA

Provider ID: 311885
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: 1124580139

 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

 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

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D. دليل مقدمي الخدمات المتخصصين

 **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\None
American Sign Language (ASL):
N

 **Accessibility: CONTACT
PROVIDER**
 **Hours: M-F 8AM-5PM**
 **Website: N/A**
IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

FRANK, ETHAN

Provider ID: 310279
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: 1720584345

 **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**

 **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

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

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D. دليل مقدمي الخدمات المتخصصين

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 WHITTIER HOSPITAL, 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 WHITTIER HOSPITAL, 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: Yes
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: 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

QIAN, ZHEN

Provider ID: 311003
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: 1356796783

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\18

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):  Website: N/A

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

LASALLE, ELIZABETH

Provider ID: 313253

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

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: 1235634015

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

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

SILVA SEPULVEDA, 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

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL

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.

D. دليل مقدمي الخدمات المتخصصين

 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, 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

ALAYARI, AMETHYST

Provider ID: 311383
 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: 1740778653

 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 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

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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 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: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE

Provider ID: 216969
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

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D. دليل مقدمي الخدمات المتخصصين

 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,

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

 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\18

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

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, 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

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302318

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 25170 HANCOCK AVE STE
150

MURRIETA, CA 92562

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (951) 696-6124

Provider Gender: Male

NPI: 1194145946

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, 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

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
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

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

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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: 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, 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

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

Hospital Affiliation:

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: 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

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\18

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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, 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

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, 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

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 CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, 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

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311395
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 25170 HANCOCK AVE FL 1

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MURRIETA, CA 92562
 Phone: (951) 600-1640
 Fax: (951) 600-1760
 After Hours Phone: (951) 600-1640
 Provider Gender: Female
 NPI: 1588846380
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: German, Hindi, Marathi, 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-F 8AM-5PM
 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\18
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
 Provider ID: 310618
 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: 1063916633
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: 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.

D. دليل مقدمي الخدمات المتخصصين

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: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

JAZAYERI, AMIR

Provider ID: 310953

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: 1316385925

 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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SHARMA, ANITA

Provider ID: 311775

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: 1871989335

 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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN

Provider ID: 310301

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Female

NPI: 1609365402

 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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294382

Board Certified Specialty: No
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

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

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

PEDIATRIC RHEUMATOLOGY

PHADKE, OMKAR

Provider ID: 315125

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: 1598140238

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\18

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

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
 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
VARGAS TRUJILLO, 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: UCSF
 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

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D. دليل مقدمي الخدمات المتخصصين

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\None

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
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\18

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

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D. دليل مقدمي الخدمات المتخصصين

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

Min/Max 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

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\18

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

 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: 1750745394
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: 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
 Website: N/A
 IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
 Provider ID: 313307
 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: Male
 NPI: 1407388564
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, 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
 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
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Rady Childrens Health Network	Network	RADY CHILDRENS HEALTH NETWORK
<u>SURGERY GENERAL</u>	<u>SURGERY GENERAL</u> <u>VASCULAR</u>	
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	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 PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group <u>SURGERY ORTHOPEDIC</u> CHENG, YU-TSUN Provider ID: 301902 Board Certified Specialty: No	 25170 HANCOCK AVE MURRIETA, CA 92562  Phone: (951) 600-1640 Fax: (951) 600-1760  After Hours Phone: (951) 600-1640 Provider Gender: Male NPI: 1992982854  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY 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 <u>SURGERY ORTHOPEDIC</u> UPASANI, VIDYADHAR Provider ID: 283160 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

SURGERY PEDIATRIC

THOMPSON, KYLE

Provider ID: 310986

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: Male

NPI: 1598147050

Provider English Spoken: Y

Provider Language(s)

Spoken: French

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

CARDIOVASCULAR DISEASE

DAMANI, SAMIR

Provider ID: 310638
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 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: Community Care IPA LLC, IHP of Southern Cal-PHP

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: No
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

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) 356-2726
 **After Hours Phone:** (844) 200-2426
Provider Gender: Female
NPI: 1801557947
 **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: 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

CERTIFIED NURSE PRACTITIONER

KIM, YUNMI

Provider ID: 312917

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2101 GRANGER AVE STE 101
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 356-2726

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1467166942

 Provider 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

CERTIFIED NURSE PRACTITIONER

MCCULLOUGH, LYAN LOVE

Provider ID: 310623

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 356-2726

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1063759181

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UC SAN
DIEGO HEALTH - EAST

CAMPUS MEDICAL CENTER

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

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

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D. دليل مقدمي الخدمات المتخصصين

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: 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

DERMATOLOGY

LIN, SHINKO

Provider ID: 306319

Board Certified Specialty: No
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

DERMATOLOGY

LIN, SHINKO

Provider ID: 308216

Board Certified Specialty: No
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,

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D. دليل مقدمي الخدمات المتخصصين

IHP of Southern Cal-PHP

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 316321

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

330 E 8TH ST STE 340

NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1467714436

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

NAVARRO, VANESSA MARIA

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) 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

FAMILY PRACTICE

TRAN, KIM

Provider ID: 311691

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: 1447873534

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):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

TRAN, KIM

Provider ID: 312035

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: 1447873534

 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: IHP of Southern Cal-PHP

INTERNAL MEDICINE

THAYER, KARISA

Provider ID: 310229

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: 1558765941

 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

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: Community Care IPA LLC,
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

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D. دليل مقدمي الخدمات المتخصصين

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

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, SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO, UC SAN DIEGO HEALTH - EAST CAMPUS

MEDICAL CENTER, UC SAN

DIEGO HEALTH - EAST

CAMPUS MEDICAL CENTER

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

DEL ROSARIO, 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

 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

DEL ROSARIO, 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,

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D. دليل مقدمي الخدمات المتخصصين

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

DEL ROSARIO, 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

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

BARNARD, LUKE

Provider ID: 310549
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
NPI: 1710543111
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: TH 8:30AM-6PM
F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

OPHTHALMOLOGY

BARNARD, LUKE

Provider ID: 311674

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Provider Gender: Male

NPI: 1710543111

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TH 8:30AM-6PM
F 8:30AM-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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

THACH, QUEEN

Provider ID: 312235

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: 1053841478

Provider 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,
IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN

Provider ID: 310537

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: 1053841478

Provider 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,
IHP of Southern Cal-PHP

PODIATRIST

ATMAR, AKMAL

Provider ID: 269784

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: 308637

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 292-2493

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D. دليل مقدمي الخدمات المتخصصين

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

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: 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):

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, JOHN

Provider ID: 312176

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

☎ Phone: (619) 427-3481

Fax: (619) 420-7807

☎ After Hours Phone: (619)

427-3481

Provider Gender: Male

NPI: 1689069874

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, 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-TH 9AM-4:30PM
F 9AM-12PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, 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-TH 9AM-4:30PM
 F 9AM-12PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

REGISTERED DIETITIAN / NUTRITIONIST

**KRISHNAMURTHY,
MEENAKSHI**
 Provider ID: 311655
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA 91950
 Phone: (619) 475-4900
 Fax: (619) 475-8373
 After Hours Phone: (619)
 475-4900
 Provider Gender: Female
 NPI: 1790304822
 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

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

CHUNG, PETER
 Provider ID: 314479
 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: Male
 NPI: 1023837887
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Korean
 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-12PM
 Website: N/A
 IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
 Provider ID: 299888

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D. دليل مقدمي الخدمات المتخصصين

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
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

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 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

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D. دليل مقدمي الخدمات المتخصصين

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

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

PASCUAL, CHRISTOPHER

Provider ID: 314205

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: 1093328064

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 10\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-5PM

SA 8AM-2PM

Website: N/A

IPA: Community Care IPA LLC

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-12PM

W-TH 7AM-7PM

F 7AM-12PM

Website: N/A

IPA: Community Care IPA LLC,

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D. دليل مقدمي الخدمات المتخصصين

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) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

DAIRO, BRANDON

Provider ID: 299882

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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: 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

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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,
IHP of Southern Cal-PHP

CERTIFIED NURSE **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: No

Min/Max Age: 0\18
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**

CARROLL, MAYA

Provider ID: 315199

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054

 Phone: (760) 736-6767
Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1699315473

 Provider 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**

DECARLI, TASIA

Provider ID: 315337

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3763

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1598158768

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 6\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 SA 9AM-4PM  Website: N/A IPA: IHP of Southern Cal-PHP	DECARLI, TASIA Provider ID: 315338 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: 1598158768	 Provider 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
<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>
DECARLI, TASIA Provider ID: 315336 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  517 N HORNE ST OCEANSIDE, CA 92054  Phone: (760) 631-5000  Fax: (760) 414-3763  After Hours Phone: (760) 631-5000 Provider Gender: Female NPI: 1598158768  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 6\None American Sign Language (ASL): N	 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  Website: N/A IPA: IHP of Southern Cal-PHP	<u>CERTIFIED NURSE PRACTITIONER</u> 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: No Min/Max Age: 0\None American Sign Language (ASL): N
<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>
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	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 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: No Min/Max Age: 0\None American Sign Language (ASL): N
<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>	<u>CERTIFIED NURSE PRACTITIONER</u>

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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

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

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: 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: 310480
 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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 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

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
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

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
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: 1245695006

 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.

D. دليل مقدمي الخدمات المتخصصين

 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
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
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

NIBBELINK AHEARN, SANDRA

Provider ID: 310107
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: Female
NPI: 1326513441

 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

NIBBELINK AHEARN, SANDRA

Provider ID: 311969
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
 Phone: (760) 967-9900
Fax: (760) 967-6769

 After Hours Phone: (760)
967-9900

Provider Gender: Female
NPI: 1326513441

 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

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 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

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE **PRACTITIONER**

RICHARDS, KRISINDA

Provider ID: 313332

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: 1669914941

 Provider 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**

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: No

Min/Max Age: 0\19

American Sign Language (ASL):
 N

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D. دليل مقدمي الخدمات المتخصصين

 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

WALKER, 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 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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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

NPI: 1750791745

 Provider 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

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

DERMATOLOGY

BROWN, REGINA

 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\18

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

MILLER, DIANA

Provider ID: 314934

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: 1407204969

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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D. دليل مقدمي الخدمات المتخصصين

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

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

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KERN
MEDICAL CENTER

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-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SEAWELL, CHRISTINE

Provider ID: 312255

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1982280939

 Provider 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

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 308044

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3923 WARING RD STE A
OCEANSIDE, CA 92056

 Phone: (760) 724-8782
Fax: (760) 842-7801

 After Hours Phone: (760)
724-8782

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-TH 8AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282166

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4002 VISTA WAY
OCEANSIDE, CA 92056

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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, CORONA
REGIONAL MED CTR,
CORONA REGIONAL MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR, UCI
HEALTH-FOUNTAIN 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

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,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
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: 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
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, 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: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 264686

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D. دليل مقدمي الخدمات المتخصصين

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, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL

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: 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 MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp
Grossmont Hospital, Sharp

Grossmont 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

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
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,

Sharp Grossmont Hospital,
Sharp Grossmont Hospital,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
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

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
 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: 316347
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 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
 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: 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
 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

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D. دليل مقدمي الخدمات المتخصصين

 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 9AM-5PM  Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP	American Sign Language (ASL): Network, UCSD Medical Group N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network	<u>OBSTETRICS / GYNECOLOGY</u> LOEFFLER, ALLISON Provider ID: 311880 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  2210 MESA DR STE 5 OCEANSIDE, CA 92054  Phone: (760) 736-6767 Fax: (760) 736-8740  After Hours Phone: (760) 736-6767 Provider Gender: Female NPI: 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 Medi-Cal Open 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
<u>NEUROLOGY</u> 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\18	<u>NEUROLOGY</u> PASSIAK, BRITTANY Provider ID: 311210 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: 1467949693  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  Website: N/A IPA: Rady Childrens Health	<u>OPHTHALMOLOGY</u> BANSAL, PREETI Provider ID: 205619

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D. دليل مقدمي الخدمات المتخصصين

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, PALOMAR MEDICAL

CENTER, 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

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,

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: 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

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

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205509

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

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D. دليل مقدمي الخدمات المتخصصين

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, PALOMAR MEDICAL CENTER, 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

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, 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, UCSD Medical Group

OPHTHALMOLOGY

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, 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: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA

Provider ID: 311888
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

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1124580139

 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

 Website: N/A

IPA: Rady Childrens Health
Network

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

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-12PM

 Website: N/A

IPA: Community Care IPA LLC

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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): Network

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

OTOLARYNGOLOGY

FRANK, ETHAN

Provider ID: 310281

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: 1720584345

☑ 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

🌐 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

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

OTOLARYNGOLOGY

PATEL, VIJAY

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D. دليل مقدمي الخدمات المتخصصين

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 CARDIOLOGY

LASALLE, ELIZABETH

Provider ID: 313255

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: 1235634015

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: 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\18

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Medi-Cal Open Panel: No Min/Max Age: 0\None 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	ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\18 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
<u>PEDIATRIC EMERGENCY MEDICINE</u> CRAWFORD, MICHAEL Provider ID: 311160 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: 1336727791  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: CHILDRENS HOSPITAL OF	<u>PEDIATRIC EMERGENCY MEDICINE</u> GORHAM, LAURA Provider ID: 275786 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	<u>PEDIATRIC EMERGENCY MEDICINE</u> 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 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\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.

D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM  Website: N/A IPA: Rady Childrens Health Network	 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: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network
<u>PEDIATRIC EMERGENCY MEDICINE</u>	<u>PEDIATRIC EMERGENCY MEDICINE</u>	<u>PEDIATRIC EMERGENCY MEDICINE</u>
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 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	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 Medi-Cal Open Panel: Yes	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 Cultural Competency: N Hospital Affiliation: 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

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D. دليل مقدمي الخدمات المتخصصين

M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY
Provider ID: 311932
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: 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
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: Rady Childrens Health Network

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 CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
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: 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
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 ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311397
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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D. دليل مقدمي الخدمات المتخصصين

 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: 1588846380
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Marathi, 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-F 8AM-5PM
 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN

Provider ID: 310303
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-8052
Fax: (858) 966-7789
 After Hours Phone: (858) 966-8052
Provider Gender: Female

NPI: 1609365402
 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
 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

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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

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
 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

KIM, DANIEL

Provider ID: 314074
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 3629 VISTA WAY
 OCEANSIDE, CA 92056
 Phone: (760) 757-7546
 Fax: (760) 828-9140
 After Hours Phone: (760) 757-7546
 Provider Gender: Male
 NPI: 1275813370
 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean
 Cultural Competency: N
 Hospital Affiliation: ARROWHEAD 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA

Provider ID: 314056

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1649906108

☐ 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1215233028
 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

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
 Provider ID: 311087
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056
 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, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA 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

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
 Provider ID: 311103
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056
 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, UCSD MEDICAL CTR, 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: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
 Provider ID: 311154
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056
 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
 Hospital Affiliation: UCSD MEDICAL CTR, 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: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN
 Provider ID: 311150
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056
 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: 1609130921

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, 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

 Website: N/A

IPA: UCSD Medical Group

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Network

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

SURGERY PEDIATRIC

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

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D. دليل مقدمي الخدمات المتخصصين

Network

SURGERY PEDIATRIC

KLING, KAREN

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

SURGERY PEDIATRIC

THOMPSON, KYLE

Provider ID: 310988

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: 1598147050

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

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

 Website: N/A

IPA: Rady Childrens Health
Network

POWAY

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: 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

WRIGHT, KIMBERLY

Provider ID: 256378

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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D. دليل مقدمي الخدمات المتخصصين

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

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

DERMATOLOGY

POUSTI, BOBAK

Provider ID: 311624

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: Male

NPI: 1932736451

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, 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

8:30AM-4:30PM

F 8:30AM-4PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

DERMATOLOGY

POUSTI, BOBAK

Provider ID: 313151

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: Male

NPI: 1932736451

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, 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
8:30AM-4:30PM
F 8:30AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
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

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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: 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) 592-0627

 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,
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

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, SOUTHWEST
HEALTHCARE INLAND

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

VALLEY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

HAMILTON, ROSS

Provider ID: 311790

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE
580

POWAY, CA 92064

 Phone: (760) 631-3000

Fax: (760) 631-3016

 After Hours Phone: (760)
631-3000

Provider Gender: Male

NPI: 1538587852

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, 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-4:30PM

 Website: N/A

IPA: Community Care IPA LLC

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)
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, PALOMAR MEDICAL
CENTER

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 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): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

PODIATRIST

BRAZIER, SETH

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\18
 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: 311056
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 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\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

HAN, KYOUNG

Provider ID: 296326
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 15706 POMERADO RD STE 102
 POWAY, CA 92064

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
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

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
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

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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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-TH 8AM-4PM

 Website: N/A

IPA: Community Care IPA LLC

SURGERY GENERAL

GROVE, JAY

Provider ID: 305851

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 15611 POMERADO RD
POWAY, CA 92064

 Phone: (760) 300-3647

Fax: (858) 207-0034

 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

 Website: N/A

IPA: 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, PALOMAR MEDICAL
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

 Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT,
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, PALOMAR MEDICAL
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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, 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: Community Care IPA LLC

RAMONA

CERTIFIED NURSE PRACTITIONER

SALAS GAERLAN, JESSICA

Provider ID: 269344
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 211 13TH ST
RAMONA, CA 92065
 Phone: (760) 789-5160
Fax: (760) 788-7962
 After Hours Phone: (760)
789-5160
Provider Gender: Female
NPI: 1356817431
 Provider English Spoken: Y
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: Community Care IPA LLC

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, 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

SAN DIEGO

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY

Provider ID: 313299
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: 1346515442
 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

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

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

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY

Provider ID: 312693

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 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

 Website: N/A

IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

SILVA ENCISO, JORGE

Provider ID: 312727

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1639404031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, PIONEERS

MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL

CENTER, 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

ALLERGY IMMUNOLOGY **BALUCH, NARGES**

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 310787

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5961

Fax: (858) 966-6791

After Hours Phone: (858)
966-5961

Provider Gender: Female

NPI: 1720822133

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

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

Website: N/A

IPA: Rady Childrens Health
Network

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

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

ALLERGY IMMUNOLOGY

WANG, XINYU

Provider ID: 313573

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: 1720548001

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

ALLERGY IMMUNOLOGY

WANG, XINYU
 Provider ID: 313572
 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: 1720548001

 Provider 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

AL AZZAWI, SARAH
 Provider ID: 312973
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Phone: (858) 554-1212
 Fax: (888) 539-8781

 After Hours Phone: (858) 554-1212

Provider Gender: Female

NPI: 1063041887

 Provider 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

AL AZZAWI, SARAH
 Provider ID: 312975
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (858) 554-1212
 Fax: (888) 539-8781

 After Hours Phone: (858) 554-1212

Provider Gender: Female

NPI: 1063041887

 Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1265938724

 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

ANESTHESIOLOGY

BHATIA, KARISHMA

Provider ID: 313006

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1932764081

 Provider 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

BHATIA, KARISHMA

Provider ID: 313008

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1932764081

 Provider 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

BIGELOW, ELSIE

Provider ID: 313507

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1215565114

 Provider 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

BIGELOW, ELSIE

Provider ID: 313508

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: 1215565114

 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

ANESTHESIOLOGY

BUI, AN
 Provider ID: 316093
 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: 1467080341

 Provider 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

BUI, AN
 Provider ID: 316094
 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: 1467080341

 Provider 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

CABANISS, SCOTT
 Provider ID: 311435
 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: 1821626714

 Provider 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

CABANISS, SCOTT
 Provider ID: 311436
 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: 1821626714

 Provider 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

CANO, SARAH
 Provider ID: 200959
 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

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D. دليل مقدمي الخدمات المتخصصين

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

 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN

Provider ID: 311460

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

 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: 1649730367

 Provider 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

COBLENTZ, IAN

Provider ID: 311461

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: 1649730367

 Provider 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

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

DARWISH, ALEX

Provider ID: 313027

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1043839970

 Provider 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

DARWISH, ALEX

Provider ID: 313025

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1043839970

 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): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 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

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

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

GARRETT, RILEY

Provider ID: 313742

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: 1740642776

 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

ANESTHESIOLOGY

GARRETT, RILEY

Provider ID: 313740

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: 1740642776

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

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

 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE

Provider ID: 311501

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: 1205381316

 Provider 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

GOH, REGINE

Provider ID: 311500

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: 1205381316

 Provider 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

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
Medi-Cal Open Panel: Yes

Min/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

KAWASAKI, MEGAN

Provider ID: 313585

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: 1073140059

 Provider 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.

D. دليل مقدمي الخدمات المتخصصين

ANESTHESIOLOGY

KAWASAKI, MEGAN

Provider ID: 313583

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: 1073140059

Provider 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

KIM, ELIZABETH

Provider ID: 313002

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1831726744

Provider 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

KIM, ELIZABETH

Provider ID: 313004

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1831726744

Provider 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

KROL, CAITLIN

Provider ID: 313048

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1518594910

Provider 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

KROL, CAITLIN

Provider ID: 313046

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1518594910

Provider English Spoken: Y
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: UCSD Medical Group

ANESTHESIOLOGY

MALONEY, IAN

Provider ID: 313016

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1508492422

 Provider 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

MALONEY, IAN

Provider ID: 313014

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1508492422

 Provider 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

MEASER, JACQUELINE

Provider ID: 312978

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1790300671

 Provider 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

MEASER, JACQUELINE

Provider ID: 312976

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1790300671

 Provider 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

MEYER, MEGAN

Provider ID: 239607

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: 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

MOELLENHOFF, MICHAEL

Provider ID: 311123

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: 1679584791

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation:

DOMINICAN SANTA CRUZ
 HOSP, 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

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL

Provider ID: 311124

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: 1679584791

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation:
 DOMINICAN SANTA CRUZ
 HOSP, UCSD MEDICAL CTR

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: 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
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

SNOW, ERICA

Provider ID: 312989
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (858) 554-1212
Fax: (888) 539-8781

 After Hours Phone: (858) 554-1212

Provider Gender: Female
NPI: 1023637808

 Provider 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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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

ANESTHESIOLOGY

SNOW, ERICA

Provider ID: 312990

Board Certified Specialty: No
UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1023637808

Provider 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

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

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

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D. دليل مقدمي الخدمات المتخصصين

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, CORONA 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: 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

TU, MONIQUE

Provider ID: 310428

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: 1497080436

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UC SAN
DIEGO HEALTH - EAST
CAMPUS MEDICAL CENTER,
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

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283689

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
 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
 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

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

ZAERPOOR, DARA

Provider ID: 313029
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (858) 554-1212
 Fax: (888) 539-8781
 After Hours Phone: (858) 554-1212

Provider Gender: Male
 NPI: 1497226450

 Provider 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

ZAERPOOR, DARA

Provider ID: 313030
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

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D. دليل مقدمي الخدمات المتخصصين

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1497226450

 Provider 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 CRITICAL CARE MEDICINE

KRAUSE, MARTIN

Provider ID: 280539

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: 1417243239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, 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

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: 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

Min/Max Age: 18\100

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

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

DEJULIO, PAUL

Provider ID: 316042

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: 1871851154

 Provider 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 PAIN MANAGEMENT

DEJULIO, PAUL

Provider ID: 316043

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: 1871851154

 Provider 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

AUDIOLOGIST

KIM, SHANNON

Provider ID: 313050

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1457199705

 Provider 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

CARDIAC

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

ELECTROPHYSIOLOGY

BIRGERSDOTTER GREEN, ULRIKA

Provider ID: 312708

Board Certified Specialty: No
UCSD MEDICAL GROUP

2131 3RD AVE

SAN DIEGO, CA 92101

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851349757

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

CARDIAC

ELECTROPHYSIOLOGY

HAN, FREDERICK

Provider ID: 312717

Board Certified Specialty: No
UCSD MEDICAL GROUP

2131 3RD AVE

SAN DIEGO, CA 92101

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

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON
 Provider ID: 312729
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2131 3RD AVE
 SAN DIEGO, CA 92101
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1346516069
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

CARDIAC

ELECTROPHYSIOLOGY

RAISSI SHABARI, FARSHAD
 Provider ID: 312736
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2131 3RD AVE
 SAN DIEGO, CA 92101
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1124295027
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, French
 Cultural Competency: N
 Hospital Affiliation: PIONEERS
 MEMORIAL HOSPITAL, EL
 CENTRO REGIONAL 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
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH

Provider ID: 312690

Board Certified Specialty: No
UCSD MEDICAL GROUP

2131 3RD AVE

SAN DIEGO, CA 92101

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346470408

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

Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW

Provider ID: 312734

Board Certified Specialty: No
UCSD MEDICAL GROUP

2131 3RD AVE

SAN DIEGO, CA 92101

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952535114

Provider English 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

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS

Provider ID: 312679

Board Certified Specialty: No
UCSD MEDICAL GROUP

2131 3RD AVE

SAN DIEGO, CA 92101

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

Website: N/A

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

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D. دليل مقدمي الخدمات المتخصصين

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

COTTER, BRUNO

Provider ID: 312732

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205886389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, German

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

CARDIOVASCULAR DISEASE

MIZZELL, ANNA

Provider ID: 312680

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 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

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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

NAREZKINA, ANNA

Provider ID: 312913

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: 1891958773

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, 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

NAREZKINA, ANNA

Provider ID: 312914

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: 1891958773

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, 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

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA

Provider ID: 316062

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6030 VILLAGE WAY STE
200

SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891958773

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, PIONEERS

MEMORIAL HOSPITAL, 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

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA

Provider ID: 312915

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: 1891958773

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, 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

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

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

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS

Provider ID: 310450

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE
SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609225135

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 312725

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 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

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

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 313720

Board Certified Specialty: No



6655 ALVARADO RD

SAN DIEGO, CA 92120



Phone: (800) 926-8273



After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811382815

 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

CARDIOVASCULAR DISEASE

SHEN, JIA

Provider ID: 311526

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: 1295053403

 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

 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEN, JIA

Provider ID: 312731

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1295053403

 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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST

 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

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

Sharp Grossmont Hospital, UC

SAN DIEGO HEALTH - EAST

CAMPUS MEDICAL CENTER,

SHARP CORONADO HOSP

AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): VISTA, SCRIPPS MERCY

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI

Provider ID: 302987

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 6402 EL CAJON BLVD STE 102

SAN DIEGO, CA 92115

 Phone: (858) 499-1900

Fax: (619) 582-4737

 After Hours Phone: (858) 499-1900

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, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

Sharp Grossmont Hospital, UC

SAN DIEGO HEALTH - EAST

CAMPUS MEDICAL CENTER,

SHARP CORONADO HOSP

AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): VISTA, SCRIPPS MERCY

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

SILVA ENCISO, JORGE

Provider ID: 313721

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 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: 1639404031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, PIONEERS

MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL

CENTER, 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

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL

Provider ID: 312911

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: 1699063701

 Provider English Spoken: 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

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL

Provider ID: 312910

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: Male

NPI: 1699063701

 Provider English Spoken: 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

WILKINSON, MICHAEL

Provider ID: 316083

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6030 VILLAGE WAY STE
200

SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699063701

 Provider English Spoken: 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

CARDIOVASCULAR DISEASE

YEANG, CALVIN

Provider ID: 238822

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D. دليل مقدمي الخدمات المتخصصين

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

APPENZELLER, ERICA

Provider ID: 310772

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: 1780828384

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 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

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

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

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

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

CERTIFIED 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
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

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

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
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 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

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 ACUPUNCTURIST

DISTEFANO, KIMBERLY

Provider ID: 311062

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: 1851914220

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

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY

Provider ID: 311063

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: 1851914220

 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

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: 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

JULIAN, FIDES

Provider ID: 277699

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: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

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

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: 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

Medi-Cal Open Panel: Yes

Min/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

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

LEE, JIHYUNG

Provider ID: 312192

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

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1073212338

☐ Provider 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

LEE, JIHYUNG

Provider ID: 312189

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: 1073212338

☐ Provider 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

LEE, JIHYUNG

Provider ID: 312190

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: Male

NPI: 1073212338

☐ Provider 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

SEITZ, GRETCHEN

Provider ID: 246474

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

📍 9995 CARMEL MOUNTAIN
RD STE B10
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

ABU-DOULEH, NADIA

Provider ID: 311556

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: 1851157937

☐ 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-6PM
SA 8AM-5PM

 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

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

ALLEN, KATHERINE

Provider ID: 315215

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (877) 673-1361

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1831557024

 Provider 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 8AM-7:30PM

W 8AM-5PM

TH 8AM-7:30PM

F 8AM-5PM

SA 8AM-12PM

 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

Hospital Affiliation: TRI CITY
MEDICAL CTR, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CERTIFIED NURSE PRACTITIONER

ARENAS, CECILY

Provider ID: 311129

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE
SAN DIEGO, CA 92101
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1700031507

 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

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

Medi-Cal Open Panel: Yes
Min/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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Female
 NPI: 1144809393
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RIVERSIDE
 COMMUNITY HOSP, 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

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
 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

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
 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

CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA
 Provider ID: 311039

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 6645 ALVARADO RD
 SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1750033890
 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

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

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D. دليل مقدمي الخدمات المتخصصين

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

 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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942430442
📄 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

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
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

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
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 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

CHUNG, SUEMIN

Provider ID: 311038

Board Certified Specialty: No
UCSD MEDICAL GROUP

6645 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1598477093

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

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA

Provider ID: 316077

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: 1194551861

Provider 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

CIAFONE, JOANNA

Provider ID: 316076

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: 1194551861

Provider 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

CIAFONE, JOANNA

Provider ID: 316078

Board Certified Specialty: No
UCSD MEDICAL GROUP

6363 GREENWICH DR
SAN DIEGO, CA 92122

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1194551861

 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

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA

Provider ID: 316074

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6645 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1194551861

 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

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA

Provider ID: 316075

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: 1194551861

 Provider 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

COLEMAN, PAGE

Provider ID: 311049

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6645 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1871365312

 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,

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

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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-F 8AM-5PM
SA 8AM-2PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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, 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

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
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):

CERTIFIED NURSE PRACTITIONER

CORREA, ANN MARIE

Provider ID: 314732
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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D. دليل مقدمي الخدمات المتخصصين

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0505
 After Hours Phone: (619)
234-2158
Provider Gender: Female
NPI: 1083420814
 Provider 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

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

CRAWFORD, MARK
Provider ID: 316071
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: 1487368114
 Provider 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

CRAWFORD, MARK
Provider ID: 316070
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: 1487368114
 Provider 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

CRAWFORD, MARK
Provider ID: 316072
Board Certified Specialty: No
UCSD MEDICAL GROUP
 6363 GREENWICH DR
SAN DIEGO, CA 92122
 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 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: (800) 926-8273

Provider Gender: Male

NPI: 1487368114

☐ Provider 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

CRAWFORD, MARK

Provider ID: 316068

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 6645 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1487368114

☐ Provider 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

CRAWFORD, MARK

Provider ID: 316069

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: 1487368114

☐ Provider 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

CRAWFORD, MARK

Provider ID: 313811

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: 1487368114

☐ Provider 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,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK

Provider ID: 313812

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: Male

NPI: 1487368114

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 SA 8AM-2PM  Website: N/A IPA: IHP of Southern Cal-PHP, UCSD Medical Group	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group	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
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	CERTIFIED NURSE PRACTITIONER DAVIES-UPPAL, ALLISON Provider ID: 311441 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: 1053002360  Provider 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 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
	CERTIFIED NURSE PRACTITIONER DAVIS, JANET	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1528632742
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, 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,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DECOOL, TAYLOR

Provider ID: 314112

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: 1548019763

 Provider 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

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

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

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

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

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

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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

CERTIFIED NURSE PRACTITIONER

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: 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

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

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

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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
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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: 316359
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 9995 CARMEL MOUNTAIN
RD STE B10
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

 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

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D. دليل مقدمي الخدمات المتخصصين

 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

FERMIL, YVONNE

Provider ID: 311352

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 564-8236

 After Hours Phone: (619) 266-3332

Provider Gender: Female

NPI: 1518086388

 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 NURSE PRACTITIONER

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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network

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

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

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299466

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127

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D. دليل مقدمي الخدمات المتخصصين

 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

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

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

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

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA

Provider ID: 310325

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: 1447577671

 Provider 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

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 PRACTITIONER

HA, THU

Provider ID: 293261

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD

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D. دليل مقدمي الخدمات المتخصصين

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

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

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: No
 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

CERTIFIED NURSE PRACTITIONER

HEFNER, ANNA
 Provider ID: 308420
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 10737 CAMINO RUIZ STE

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D. دليل مقدمي الخدمات المتخصصين

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

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

HOERRES, LYNN
Provider ID: 315272
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: 1689226508
☐ 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

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

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D. دليل مقدمي الخدمات المتخصصين

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

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

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA
Provider ID: 275563
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: 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

KIDANE, ZINNIA
Provider ID: 302426
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925

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D. دليل مقدمي الخدمات المتخصصين

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

KIM, YUNMI

Provider ID: 312916

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: 1467166942

Provider 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

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

LAINÉ, LESLIE

Provider ID: 316090

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: 1265019020

☑ Provider 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

LAINE, LESLIE

Provider ID: 316089

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: 1265019020

☑ Provider 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

LAINE, LESLIE

Provider ID: 316091

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 6363 GREENWICH DR
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265019020

☑ Provider 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

LAINE, LESLIE

Provider ID: 316087

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 6645 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265019020

☑ Provider 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

LAINE, LESLIE

Provider ID: 316088

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: 1265019020

☑ 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

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

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: 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) 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: 301603
 Board Certified Specialty: No
 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

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D. دليل مقدمي الخدمات المتخصصين

CERTIFIED NURSE PRACTITIONER

LUNA, ABIGAIL

Provider ID: 315816

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1366299315

Provider 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 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MANZO, CORINA

Provider ID: 304481

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: 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: (877) 673-1361

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 299647
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**

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: 299648

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: 1891061966

 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

 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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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: 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

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

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

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

NORTON, CALEB

Provider ID: 314347

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: 1316619430

 Provider 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

NORTON, CALEB

Provider ID: 314650

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (619) 294-3746

Fax: (619) 543-3645

 After Hours Phone: (619)
294-3746

Provider Gender: Male

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1316619430

 Provider 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

NORTON, CALEB

Provider ID: 314348
Board Certified Specialty: No
UCSD MEDICAL GROUP
 6645 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1316619430

 Provider 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

NORTON, CALEB

Provider ID: 314349
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: 1316619430

 Provider 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

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: (878) 673-1361
 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

OREJEL, EDITH

Provider ID: 296716
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: 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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	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	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: 1003677816
<u>CERTIFIED NURSE PRACTITIONER</u> 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):	<u>CERTIFIED NURSE PRACTITIONER</u> PACIS, NOAH Provider ID: 314360 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: 1003677816  Provider 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	 Provider 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
N  Accessibility: CONTACT PROVIDER  Hours: M 8:30AM-5:30PM TU 5:30PM-8:30PM	<u>CERTIFIED NURSE PRACTITIONER</u> PACIS, NOAH Provider ID: 314361 Board Certified Specialty: No	<u>CERTIFIED NURSE PRACTITIONER</u> PACIS, NOAH Provider ID: 314362 Board Certified Specialty: No UCSD MEDICAL GROUP  6645 ALVARADO RD SAN DIEGO, CA 92120  Phone: (800) 926-8273  Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1003677816  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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH

Provider ID: 314363

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: 1003677816

 Provider 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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAPPALARDO, ASHLEY

Provider ID: 311107

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: 1386302099

 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

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):

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D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP	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	Fax: (877) 673-1361  After Hours Phone: (619) 429-3733 Provider Gender: Female NPI: 1821819301  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u> 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	 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1275904047  Provider English Spoken: Y  Provider Language(s) Spoken: Persian 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	 Accessibility: CONTACT PROVIDER  Hours: M 8AM-5PM TU 8AM-7:30PM W 8AM-5PM TH 8AM-7:30PM F 8AM-5PM SA 8AM-12PM  Website: N/A IPA: IHP of Southern Cal-PHP
N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u> RAJIV, RENUKA Provider ID: 315856 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  1016 OUTER RD SAN DIEGO, CA 92154  Phone: (619) 429-3733	<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u> RALEIGH, DEBORAH Provider ID: 312728 Board Certified Specialty: No UCSD MEDICAL GROUP  2131 3RD AVE SAN DIEGO, CA 92101  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1689006876  Provider English Spoken: Y Cultural Competency: N
<u>CERTIFIED NURSE</u> <u>PRACTITIONER</u>		

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D. دليل مقدمي الخدمات المتخصصين

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

 *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

 *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\18

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

RILEY, JEREN

Provider ID: 313876

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: 1932742376

 *Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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

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

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

ROSS, CRYSTAL

Provider ID: 287763

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: 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: 311051

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 6645 ALVARADO RD
SAN DIEGO, CA 92120

☎ 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

🌐 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

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: 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

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

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

SALINAS, NIECEL

Provider ID: 312993

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: 1205579141

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

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 316095

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: 1205579141

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

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: 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

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: 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

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293285

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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: IHP of Southern Cal-PHP

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SELBY, BLAKE

Provider ID: 246423

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: 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

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

SIETSMA, ALEXANDRA

Provider ID: 311055

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6645 ALVARADO RD

SAN DIEGO, CA 92120

 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

CERTIFIED NURSE PRACTITIONER

SWANSON, BRIANNA

Provider ID: 313920

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: 1538848148

 Provider English Spoken: Y
Cultural Competency: N

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
SA 8AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

SWANSON, BRIANNA

Provider ID: 313921

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: 1538848148

 Provider 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-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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

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, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CERTIFIED NURSE PRACTITIONER

THOMPSON, COURTNEY

Provider ID: 311544

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

 Phone: (619) 543-3995

Fax: (619) 543-3964

 After Hours Phone: (619)
543-3995

Provider Gender: Female

NPI: 1629487285

 Provider English 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

TONG, KIM

Provider ID: 313528

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: 1861069874

 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

CERTIFIED NURSE PRACTITIONER

TONG, KIM

Provider ID: 313526

Board Certified Specialty: No
UCSD MEDICAL GROUP

 408 DICKINSON ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861069874

 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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, 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

CERTIFIED NURSE 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

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

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

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

CERTIFIED NURSE PRACTITIONER

VIBAL-POASTER, MARIA

KHRISTINA

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

Hospital Affiliation: UCSF
MEDICAL CENTER AT MOUNT
ZION

Medi-Cal Open Panel: Yes

Min/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, LA RHONDA

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

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: 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
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA

Provider ID: 313931
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: 1942037510

 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 8AM-5PM
SA 8AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA

Provider ID: 313932
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: 1942037510

 Provider 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-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA

Provider ID: 316186
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: 1942037510

 Provider 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

WEIMER, BRYANA

Provider ID: 316185
Board Certified Specialty: No
UCSD MEDICAL GROUP
 350 DICKINSON ST
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: Female

NPI: 1942037510

 Provider 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

WEIMER, BRYANA

Provider ID: 316182

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: 1942037510

 Provider 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

WEIMER, BRYANA

Provider ID: 316183

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6645 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942037510

 Provider 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

WEIMER, BRYANA

Provider ID: 316184

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: 1942037510

 Provider 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

WIETZKE, MATTHEW

Provider ID: 311060

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6645 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1518613678

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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): Provider ID: 311024

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 256374

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WOO, ANDY

Provider ID: 311024

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6645 ALVARADO RD
SAN DIEGO, CA 92120

 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

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

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, ORANGE

COAST MEM MED CTR

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): No

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA

Provider ID: 312687

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: 1356100051

 Provider 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

BARSOTTI, ALEXANDRA

Provider ID: 312688

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: 1356100051

 Provider 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

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)
926-8273

Provider Gender: Male

NPI: 1023194560

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: 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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL

Provider ID: 316038

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: 1942975313

 Provider 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

CHALISON, DANIEL

Provider ID: 316039

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: 1942975313

 Provider 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

CONRAD, SIMON

Provider ID: 316112

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: 1952970014

 Provider 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

CONRAD, SIMON

Provider ID: 316113

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: 1952970014

 Provider 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

DAVENPORT, LARIS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 316179
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: 1922699685

Provider 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

DAVENPORT, LARIS

Provider ID: 316178
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: 1922699685

Provider 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

DIAZ, VICTOR

Provider ID: 316023
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: 1336139609

Provider 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

DIAZ, VICTOR

Provider ID: 316024
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: 1336139609

Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

FARRIS, AMANDA
Provider ID: 311600
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: 1538900154

 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

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 311601
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: 1538900154

 Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1427419944

 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

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

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, 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 REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL

Provider ID: 316131

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: 1053971903

 Provider 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

HARMEYER, DANIEL

Provider ID: 316130

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: 1053971903

 Provider 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

HOWARD, LANDON

Provider ID: 316173

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: 1578338786

 Provider English Spoken: Y
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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LONDON

Provider ID: 316174

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: 1578338786

 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

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON

Provider ID: 311518

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: 1043059686

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON

Provider ID: 311517

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: 1043059686

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

 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

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

CERTIFIED REGISTERED NURSE ANESTHETIST

RHYNER, GINA

Provider ID: 313688

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: 1508163437

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

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

SCOTT, TIFFANY

Provider ID: 312870

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: 1376885186

Provider 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

SCOTT, TIFFANY

Provider ID: 312869

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: 1376885186

Provider 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

TOCCO, JESSICA

Provider ID: 312885

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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: 1366836397

 Provider 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

TOCCO, JESSICA

Provider ID: 312884

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: 1366836397

 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

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN

Provider ID: 316066

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: 1366124448

 Provider 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

TRAN, HAN

Provider ID: 316065

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: 1366124448

 Provider 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

VINCENT, BERLIN

Provider ID: 291454

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: 1144987801

 Provider English Spoken: Y
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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL

Provider ID: 313053

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1548006141

 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

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL

Provider ID: 313052

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1548006141

 Provider 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,
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 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,
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

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: 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

GOODWIN, RACHEL

Provider ID: 210018

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: 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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: SCRIPPS
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: 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
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
 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
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
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 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
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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1891752069

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

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

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

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

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

CHAMPAGNE, ALLISON

Provider ID: 310817

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: 1861957482

Provider English Spoken: Y

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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

Fax: (877) 673-1361

 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

DERMATOLOGY

BRIONES, NAOMI

Provider ID: 313462

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: 1477013878

 Provider 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

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) 900-2779

 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

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D. دليل مقدمي الخدمات المتخصصين

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

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1518427913

 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

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

KIM, GRACE

Provider ID: 313549

Board Certified Specialty: No
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 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: 1487114047

 Provider 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

KOLAR, MATTHEW

Provider ID: 312036

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: 1164050167

 Provider 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

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

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

LIU, YUJIE

Provider ID: 308315

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: Female

NPI: 1750944450

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

DERMATOLOGY

MALONEY, NOLAN

Provider ID: 311459

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: Male

NPI: 1124655618

Provider 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):
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

STERN, MARLEIGH

Provider ID: 306888

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: Female

NPI: 1710447883

☑ 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

DERMATOLOGY

SUTHERLAND, ANNA

Provider ID: 311463

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: 1881222388

☑ Provider 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

WONG, HENRY

Provider ID: 313609

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: 1437237567

☑ Provider 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

♿ 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

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D. دليل مقدمي الخدمات المتخصصين

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

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, 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

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

 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, 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

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D. دليل مقدمي الخدمات المتخصصين

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, 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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

CASAS, TAMARA

Provider ID: 313568

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: 1669962270

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, 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

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA

Provider ID: 311938

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: Female

NPI: 1669962270

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
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

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

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D. دليل مقدمي الخدمات المتخصصين

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

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

CHIN, BRIAN

Provider ID: 313570

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: 1770140782

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

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

EMERGENCY MEDICINE

COOK, LEANNE

Provider ID: 313633

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: 1053948687

 Provider 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

CORBETT, BRYAN

Provider ID: 316204

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669762472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL

CENTER, RADY CHILDRENS

HOSPITAL SAN DIEGO, 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

EMERGENCY MEDICINE

CORBETT, BRYAN

Provider ID: 316205

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: 1669762472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, 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: 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

DHILLON, NAVNEET

Provider ID: 313517

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: 1871071167

 Provider 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

DOROS, JOSHUA

Provider ID: 315893

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: 1558756395

 Provider English Spoken: Y
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: UCSD Medical Group

EMERGENCY MEDICINE

EAGLE, SONJA

Provider ID: 311503

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: 1699394114

 Provider 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

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, 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

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

HRYNIEWICKI, ADAM

Provider ID: 313523

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: 1184244014

 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
 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE

JACKSON, MEGAN

Provider ID: 313540
 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: 1154958437

 Provider 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

KRYSHTAFOVYCH, SOLOMIYA

Provider ID: 313020

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: 1801425244

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MERCY 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

EMERGENCY MEDICINE

KRYSHTAFOVYCH, SOLOMIYA

Provider ID: 313019

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: 1801425244

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MERCY 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

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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

EMERGENCY MEDICINE

LAFREE, ANDREW

Provider ID: 313673

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: 1639437809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, 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

NPI: 1639437809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, 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

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL

Provider ID: 316017

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: 1669730925

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, 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: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL

Provider ID: 316016

Board Certified Specialty: No
UCSD MEDICAL GROUP

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669730925

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

EMERGENCY MEDICINE

LAFREE, ANDREW

Provider ID: 313675

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

EMERGENCY MEDICINE

LATHAM, EMI

Provider ID: 316096

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: 1871594903

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
PARADISE VALLEY 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: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 313311

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: 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

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

LIOTTA, BENJAMIN

Provider ID: 313017

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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

LIPPI, MATTHEW

Provider ID: 311492

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: 1932736485

 Provider 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

LY, BINH

Provider ID: 316151

Board Certified Specialty: No

UCSD MEDICAL GROUP

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033140843

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, 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: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH

Provider ID: 316148

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (619) 543-3115

 After Hours Phone: (619)
543-3115

Provider Gender: Male

NPI: 1033140843

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, 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: UCSD Medical Group

EMERGENCY MEDICINE

MASON, MATTHEW

Provider ID: 313687

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: 1487116281

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: UCSD Medical Group

EMERGENCY MEDICINE

MEDAK, ANTHONY

Provider ID: 316010
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-6217
 After Hours Phone: (619)
543-6217

Provider Gender: Male
NPI: 1285675116

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, PARADISE
VALLEY 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

EMERGENCY MEDICINE

MERTE, BRYAN

Provider ID: 313611
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: 1124657804

 Provider 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

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
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

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D. دليل مقدمي الخدمات المتخصصين

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: 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: 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
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\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network

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\18
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

ROURKE, KYLE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 313483

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: 1851928386

Provider 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

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

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

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

IPA: UCSD Medical Group

EMERGENCY MEDICINE

SADLER, CHARLOTTE

Provider ID: 316055

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: 1598044117

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

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

EMERGENCY MEDICINE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SAMHA, LEEN

Provider ID: 313010

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1992334825

Provider 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

SANDIFORD, PATRICK

Provider ID: 312859

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: 1700151917

Provider 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

SCHNEIR, AARON

Provider ID: 316154

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: 1467495770

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

Medi-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

SCHNEIR, AARON

Provider ID: 316153

Board Certified Specialty: No
UCSD MEDICAL GROUP

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1467495770

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

Medi-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

SEGAL, LAUREN

Provider ID: 313710

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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: 1013278431

 Provider 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

SELF, MICHAEL

Provider ID: 313747

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: 1053702746

 Provider English 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

EMERGENCY MEDICINE

SELTZER, JUSTIN

Provider ID: 315889

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: 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

SHISHLOV, KIRILL

Provider ID: 313658

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: 1114248077

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER, 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

EMERGENCY MEDICINE

SHISHLOV, KIRILL

Provider ID: 313656

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6655 ALVARADO RD
SAN DIEGO, CA 92120

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1114248077
 Provider English Spoken: Y
 Provider Language(s) Spoken: Russian
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, 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

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, IPA: UCSD Medical Group
 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

SMITH, CASEY

Provider ID: 313730
 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: 1871099333
 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

EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 313727
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4077 5TH AVE
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1871099333
 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

EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 313729
 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: 1871099333

 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

EMERGENCY MEDICINE

SNYDER, BRIAN

Provider ID: 316145

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: 1538102835

 Provider English Spoken: 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): Provider ID: 240124

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI

Provider ID: 315894

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: 1124280730

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL

CENTER, Sharp Grossmont

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

EMERGENCY MEDICINE

TANAKA, HIDEAKI

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: 1124280730

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL

CENTER, Sharp Grossmont

Hospital, UCSD MEDICAL 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: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN

Provider ID: 315882

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

Fax: (619) 543-3115

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 543-6400

Provider Gender: Male

NPI: 1982629408

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, 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

TOMASZEWSKI, CHRISTIAN

Provider ID: 313735

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4077 5TH AVE

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982629408

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, 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

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN

Provider ID: 313736

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: 1982629408

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, 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

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN

Provider ID: 313737

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: 1982629408

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

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D. دليل مقدمي الخدمات المتخصصين

CHULA VISTA, 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

EMERGENCY MEDICINE

TORRES, ERICK

Provider ID: 313618
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: 1548846983
Provider 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

WARDI, GABRIEL

Provider ID: 316080
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: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WAYMENT, ANDREW

Provider ID: 313529
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: 1013593839
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: BEAR
VALLEY COMM HOSP,
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
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

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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

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 313702
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: 1528564150
 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

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
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

DECAMPS, SCARLETT

Provider ID: 311511
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: 1477014611

 Provider 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: 284812
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: 1083922462

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sinhala, Spanish
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

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

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: 287780

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
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1720474141
 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

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
 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

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
 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

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
 Hospital Affiliation: UCSD MEDICAL CTR
 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.

D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PHATAK, SONAL
 Provider ID: 316053
 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: 1932291119
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UC DAVIS 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

PHATAK, SONAL
 Provider ID: 316054
 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: 1932291119
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UC DAVIS 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: 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
 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

ALDERSON, CHEVON
 Provider ID: 315439
 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: Female
 NPI: 1396124145
 Provider 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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	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	N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
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)	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	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 CARRAGEE, CATHERINE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 313616

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: 1306425681

Provider 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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

FAMILY PRACTICE

HONG, DANA

Provider ID: 311455

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: 1982276341

Provider 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

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: 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

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

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300057

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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

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

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

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

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

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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1205848363

 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

FAMILY PRACTICE

MARTINEZ, BRIANNA

Provider ID: 311506

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: 1770161150

 Provider 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) 234-0206

 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: 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

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

NPI: 1275945446

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Ukrainian

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.

D. دليل مقدمي الخدمات المتخصصين

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

RIDGE, NEAL

Provider ID: 315976

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: 1053381004

 Provider 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

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

American Sign Language (ASL): 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

FAMILY PRACTICE

RYAN, RHIANNON

Provider ID: 311477

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: 1184205668

 Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

FAMILY PRACTICE

SHMERLING, ALISON

Provider ID: 312246

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: 1609295526

Provider 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

FAMILY PRACTICE

SHMERLING, ALISON

Provider ID: 312249

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: 1609295526

Provider 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

FAMILY PRACTICE

SHMERLING, ALISON

Provider ID: 312248

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: 1609295526

Provider 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

FAMILY PRACTICE

SHMERLING, ALISON

Provider ID: 312247

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: 1609295526

Provider 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 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290976

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

IHP OF SOUTHERN CAL-PHP

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
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: (877) 673-1361
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, PHU LUONG

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

Medi-Cal Open 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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):
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

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

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

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\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: Rady Childrens Health Network

GASTROENTEROLOGY

BRANCH, LAUREL

Provider ID: 313516
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: 1912437617

 Provider 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

BRANCH, LAUREL

Provider ID: 313513
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: 1912437617

 Provider 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

CARETHERS, JOHN

Provider ID: 311109
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: 1518048990

 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

CHAVEZ, LUIS

Provider ID: 311340
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
 Phone: (619) 266-3332
Fax: (619) 564-8236

 After Hours Phone: (619) 266-3332

Provider Gender: Male
NPI: 1295224905

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA VISTA, 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: IHP of Southern Cal-PHP

GASTROENTEROLOGY

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D. دليل مقدمي الخدمات المتخصصين

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

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

DAVE, SHRAVAN

Provider ID: 270450

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: Male

NPI: 1588081814

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

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316546

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: 1093548117

Provider 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

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316549

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: 1093548117

Provider 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

KRAUSE, AMANDA

Provider ID: 313631

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: Female
NPI: 1528561305
☐ Provider 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

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

KUO, SELENA

Provider ID: 313476
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: 1174029821

☐ Provider 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

KUO, SELENA

Provider ID: 313479
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: 1174029821

☐ Provider 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

NOUREDDIN, NABIL

Provider ID: 313612
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: 1972037026

☐ Provider English Spoken: Y
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	 Phone: (619) 266-3332  Fax: (619) 266-6000  After Hours Phone: (619) 266-3332 Provider Gender: Female NPI: 1770961971	2 SAN DIEGO, CA 92123  Phone: (760) 294-9260  Fax: (760) 294-9274  After Hours Phone: (760) 294-9260 Provider Gender: Male NPI: 1427140839
GASTROENTEROLOGY	 Provider English Spoken: Y	 Provider English Spoken: Y
NOUREDDIN, NABIL Provider ID: 313615 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: 1972037026  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	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	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	GASTROENTEROLOGY	GASTROENTEROLOGY
NOVO, MEGAN Provider ID: 296066 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  292 EUCLID AVE STE 115 SAN DIEGO, CA 92114	POLK, DAVID Provider ID: 275449 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  3030 CHILDRENS WAY FL	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	 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	 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: 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

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

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

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1265887723
 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

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, 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: 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, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL
Medi-Cal Open Panel: No
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

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
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: Rady Childrens Health Network

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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

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

American Sign Language (ASL):
 N

 Accessibility: CONTACT

HEARING AID DEALER / 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

ANDERSON, ELAINE

Provider ID: 268691

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

AL-BANAA, KADHIM

Provider ID: 313024

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 9333 GENESEE AVE
SAN DIEGO, CA 92121

☎ Phone: (858) 554-1212

Fax: (888) 539-8781

🕒 After Hours Phone: (858)
554-1212

Provider Gender: Male

NPI: 1548790041

☐ Provider 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

AL-BANAA, KADHIM

Provider ID: 313023

Board Certified Specialty: No
UCSD MEDICAL GROUP

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (858) 554-1212

Fax: (888) 539-8781

🕒 After Hours Phone: (858)

554-1212

Provider Gender: Male

NPI: 1548790041

☐ Provider 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: 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

Hospital Affiliation: UCSD

MEDICAL CTR

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

 Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, CHUNG-JIAH

Provider ID: 316056
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: 1548792377

 Provider English 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

HEMATOLOGY / ONCOLOGY

LEE, KAREN

Provider ID: 284165

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: 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,
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

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

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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: Rady Childrens Health Network

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

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: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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):
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

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

HOSPITALIST MD/DO

CHILDERS, DIANA

Provider ID: 275068
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
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

DUBE, AMANDA

Provider ID: 310293

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: 1710407531

 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

 Website: N/A

IPA: Rady Childrens Health
Network

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
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

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

KUPELIAN, CHLOE

Provider ID: 310785
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: 1780013748

 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

 Website: N/A

IPA: Rady Childrens Health
Network

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

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, 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

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

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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

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

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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

RAMIREZ SANCHEZ, 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, 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,
UCSD Medical Group

INFECTIOUS DISEASE

WILKIN, TIMOTHY

Provider ID: 311164

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: Male

NPI: 1740334978

 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

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

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D. دليل مقدمي الخدمات المتخصصين

INTERNAL MEDICINE BALL, SHELDON 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	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 BARRIOLA RUBARTH, RODRIGO Provider ID: 311570 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: 1336729979 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 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
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	INTERNAL MEDICINE BARRIOLA RUBARTH, RODRIGO Provider ID: 311570 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: 1336729979 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS	INTERNAL MEDICINE BARRIOLA RUBARTH, RODRIGO Provider ID: 311570 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: 1336729979 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS

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D. دليل مقدمي الخدمات المتخصصين

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

DEISS, ROBERT

Provider ID: 316718

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: 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



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

IPA: UCSD Medical Group

INTERNAL MEDICINE

FEUVRIER, ARIANA

Provider ID: 316161

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: 1548847437



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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D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group	 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
INTERNAL MEDICINE		MEDICAL CTR
FOX, SUTTON Provider ID: 313474 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: 1326624008  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	 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	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	INTERNAL MEDICINE	INTERNAL MEDICINE
N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group	GRUNVALD, EDUARDO	GUPTA, VINEET
INTERNAL MEDICINE	Provider ID: 286343	Provider ID: 313695
GRUNVALD, EDUARDO	Board Certified Specialty: No	Board Certified Specialty: No
Provider ID: 286344	UCSD MEDICAL GROUP	UCSD MEDICAL GROUP
Board Certified Specialty: No	 4303 LA JOLLA VILLAGE	 6655 ALVARADO RD
UCSD MEDICAL GROUP	DR STE 2110	SAN DIEGO, CA 92120
 200 W ARBOR DR	SAN DIEGO, CA 92122	 Phone: (800) 926-8273
SAN DIEGO, CA 92103	 Phone: (800) 926-8273	 After Hours Phone: (800) 926-8273
	 Fax: (888) 539-8781	Provider Gender: Male
	 After Hours Phone: (800) 926-8273	NPI: 1942431069
	Provider Gender: Male	 Provider English Spoken: Y
	NPI: 1497791339	 Provider Language(s) Spoken: Hindi
		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: 18\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 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

Hospital Affiliation: UCSD
MEDICAL CTR

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):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

IBARRA, ALLISON

Provider ID: 312685

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: 1881221273

 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

JABBOUR, MOUSSA

Provider ID: 256659

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: 1255741633

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

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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: UCSD Medical Group

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272936

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: 1730507872

 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

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274003

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6222

 After Hours Phone: (619) 543-6222

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: 238622

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: 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: 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

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D. دليل مقدمي الخدمات المتخصصين

 **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): IPA: UCSD Medical Group
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, SOUTHWEST

HEALTHCARE INLAND

VALLEY 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

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

 **Provider English 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

MARINO, NIKOLAS

Provider ID: 313525

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1316523988

 Provider 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

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

NGUYEN, MICHELLE

Provider ID: 311483

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: 1407367618

 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

INTERNAL MEDICINE

NGUYEN, MICHELLE

Provider ID: 311484

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: 1407367618

 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOVIKOV, YEVGENY

Provider ID: 313732
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: 1144682428

 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

PASCUA, RYAN

Provider ID: 312026
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (877) 673-1361
 After Hours Phone: (619)
429-3733
Provider Gender: Male
NPI: 1972064269

 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

INTERNAL MEDICINE

SAHA, SRISHTI

Provider ID: 316141
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: 1114554714

 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

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

 Provider English 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

SIRIPHAND, CHRISTOPHER

Provider ID: 311445

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: 1891258596

 Provider English Spoken: Y
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

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

SMITH, CHELSEY

Provider ID: 239920

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

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

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

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: 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: (855) 355-5864 Fax: (888) 539-8781  After Hours Phone: (855) 355-5864 Provider Gender: Female NPI: 1730133976
INTERNAL MEDICINE TRAN, HAO Provider ID: 313745 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: 1891997078  Provider English Spoken: Y  Provider Language(s) Spoken: Chinese, Vietnamese 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	 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	 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	INTERNAL MEDICINE WANG, ANGELA Provider ID: 259534 Board Certified Specialty: No UCSD MEDICAL GROUP  4520 EXECUTIVE DR STE P2 SAN DIEGO, CA 92121	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

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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: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

WONG, JUSTIN

Provider ID: 313599

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: 1740869387

 Provider 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

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

 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

ZHANG, SHERRY

Provider ID: 272657

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

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D. دليل مقدمي الخدمات المتخصصين

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

AFSHAR, KAMYAR

Provider ID: 311561

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 471-9186

Fax: (619) 543-8255

After Hours Phone: (619) 471-9186

Provider Gender: Male

NPI: 1407050669

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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

AKUTHOTA, PRAVEEN

Provider ID: 311490

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 471-9186

Fax: (619) 543-8255

After Hours Phone: (619) 471-9186

Provider Gender: Male

NPI: 1396704698

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

AKUTHOTA, PRAVEEN

Provider ID: 311491

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 2
SAN DIEGO, CA 92121

Phone: (855) 355-5864

Fax: (858) 657-6171

After Hours Phone: (855) 355-5864

Provider Gender: Male

NPI: 1396704698

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CRITICAL CARE MEDICINE

BARNES, LAURA

Provider ID: 312185

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: 1558749242

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, 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

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BARNES, LAURA

Provider ID: 312184

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: 1558749242

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, 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 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 210825

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

BEGOVIC, ADNAN

Provider ID: 276291

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR STE
3-313

SAN DIEGO, CA 92103

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D. دليل مقدمي الخدمات المتخصصين

 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: 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

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) 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: 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

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D. دليل مقدمي الخدمات المتخصصين

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

CROUCH, DANIEL

Provider ID: 313726
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: 1710182423
 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
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

DEWOLF, SEAN

Provider ID: 311453
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: 1518312230
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KINDRED
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR
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: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

HEPOKOSKI, MARK

Provider ID: 311546
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (855) 355-5864
 After Hours Phone: (855) 355-5864

Provider Gender: Male
NPI: 1649408790

 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

IBRAHIM, ISLAM

Provider ID: 311489
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: 1962586917

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, LONG BEACH
MEMORIAL MED CTR,
TEMECULA VALLEY HOSPITAL
INC, SOUTHWEST
HEALTHCARE INLAND

VALLEY 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: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

JOHN, MIRA

Provider ID: 311591
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: 1013448588

 Provider 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

JOHN, MIRA

Provider ID: 311590
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: 1013448588

 Provider 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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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KAMDAR, BIREN

Provider ID: 311452

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (855) 355-5864

After Hours Phone: (855)
355-5864

Provider Gender: Male

NPI: 1528115417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SANTA
MONICA UCLA MED CTR,
RONALD REAGAN 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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LIN, CHRISTINE

Provider ID: 311557

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: 1699979591

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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LIN, CHRISTINE

Provider ID: 311558

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: 1699979591

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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LIN, CHRISTINE

Provider ID: 311559

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: 1699979591

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

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 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 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

ORR, JEREMY

Provider ID: 311524

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: Male

NPI: 1992940969

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SANTA MONICA UCLA MED CTR, 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

INTERNAL MEDICINE CRITICAL CARE MEDICINE

ORR, JEREMY

Provider ID: 311525
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: 1992940969
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SANTA MONICA UCLA MED CTR, 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

INTERNAL MEDICINE CRITICAL CARE MEDICINE

PAGE, BRADY

Provider ID: 313677
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: 1528557550

 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

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, 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

INTERNAL MEDICINE GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292
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: Male
 NPI: 1447351085
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: MERCY GENERAL 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: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
 Provider ID: 313659
 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: 1477699601
 Provider English Spoken: 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

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
 Provider ID: 313660
 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: 1477699601
 Provider English Spoken: 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

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
 Provider ID: 312692
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2131 3RD AVE
 SAN DIEGO, CA 92101
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 313672

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: 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
 Website: N/A
 IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ANG, LAWRENCE

Provider ID: 313696

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: 1851529879

 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

INTERVENTIONAL CARDIOLOGY

BUI, QUAN

Provider ID: 313662

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: 1831553718

 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

INTERVENTIONAL CARDIOLOGY

BUI, QUAN

Provider ID: 310076

Board Certified Specialty: No
 UCSD MEDICAL GROUP

 2131 3RD AVE
 SAN DIEGO, CA 92101
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1831553718

 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

Medi-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

CRUZ RODRIGUEZ, JOSE

Provider ID: 312737

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE

SAN DIEGO, CA 92101

 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, 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

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, 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

INTERVENTIONAL

CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 313324

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: 1457770240

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL
CENTER, 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

INTERVENTIONAL CARDIOLOGY

GUPTA, TRIPTI

Provider ID: 316200

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: 1306290242
 Provider 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

INTERVENTIONAL CARDIOLOGY

KRUMMEN, DAVID
 Provider ID: 313714
 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: 1235152885
 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: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
 Provider ID: 312994
 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: 1285089805
 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

INTERVENTIONAL

CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
 Provider ID: 312995
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2131 3RD AVE
 SAN DIEGO, CA 92101
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1285089805
 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

INTERVENTIONAL CARDIOLOGY

MA, JANET
 Provider ID: 311577
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2131 3RD AVE
 SAN DIEGO, CA 92101
 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: 1922454396

 Provider English 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

INTERVENTIONAL CARDIOLOGY

MA, GARY

Provider ID: 313301

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: 1437503208

 Provider English Spoken: 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

INTERVENTIONAL CARDIOLOGY

MA, JANET

Provider ID: 314387

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: 1922454396

 Provider English 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

INTERVENTIONAL CARDIOLOGY

MAHMUD, EHTISHAM

Provider ID: 313738

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: 1730112335

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Urdu

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

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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D. دليل مقدمي الخدمات المتخصصين

 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

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

REEVES, RYAN

Provider ID: 313686

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: 1548440902

 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

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: Male

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

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D. دليل مقدمي الخدمات المتخصصين

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: Male

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: Male

NPI: 1811307051

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

TORRES BARBA, DAVID

Provider ID: 312707

Board Certified Specialty: No
UCSD MEDICAL GROUP

2131 3RD AVE
SAN DIEGO, CA 92101

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447612676

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL
CENTER, UCSD MEDICAL CTR,
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

INTERVENTIONAL CARDIOLOGY

UREY, MARCUS

Provider ID: 313733

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: 1972820058

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

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

 Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 313294

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: 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

 Website: N/A

IPA: UCSD Medical Group

LICENSED PROFESSIONAL CLINICAL COUNSELOR

GARCIA, JENNI

Provider ID: 299310

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3025 BEYER BLVD
SAN DIEGO, CA 92154

 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1437775863

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY

Provider ID: 316123

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

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1356846349

 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

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

VALLEY 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

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, SOUTHWEST

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, SOUTHWEST
HEALTHCARE INLAND

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

Hospital Affiliation: PALOMAR
MEDICAL CENTER, 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
 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

Hospital Affiliation: PALOMAR
 MEDICAL CENTER, 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

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

Hospital Affiliation: PALOMAR
 MEDICAL CENTER, 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

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, 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

MELBER, DORA

Provider ID: 296994

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: Female

NPI: 1124413026

 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

 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,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL
 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: Rady Childrens Health
 Network, UCSD Medical Group

 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,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL
 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: Rady Childrens Health
 Network, UCSD Medical Group

 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,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL
 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: Rady Childrens Health
 Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

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

MATERNAL AND FETAL MEDICINE

MELBER, DORA

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

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296989
 Board Certified Specialty: No
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

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: Rady Childrens Health

Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING

Provider ID: 312712

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: 1265686794

 Provider 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

NHAN-CHANG, CHIA-LING

Provider ID: 312713

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: 1265686794

 Provider 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

NHAN-CHANG, CHIA-LING

Provider ID: 312711

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: 1265686794

 Provider 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

966-6710
 Provider Gender: Female
 NPI: 1801207634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, 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: 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, 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: 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, SOUTHWEST
 HEALTHCARE INLAND
 VALLEY HOSPITAL
 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: 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

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL

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: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277307

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: 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,
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

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

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,
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

MATERNAL AND FETAL MEDICINE

SHANNON, KELLI

Provider ID: 208474

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

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D. دليل مقدمي الخدمات المتخصصين

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1922156397

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open 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

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 242522

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: 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,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
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: 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,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
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: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

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: 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

NPI: 1528454188

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

NEONATAL / PERINATAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MEDICINE	NETWORK	
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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: 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, 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: Rady Childrens Health Network	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 Network
NEONATAL / PERINATAL MEDICINE	NEONATAL / PERINATAL MEDICINE	NEONATAL / PERINATAL MEDICINE
DEL ROSARIO, PAMELA Provider ID: 295000 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	FLEMING, SARAH Provider ID: 205645 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  4077 5TH AVE SAN DIEGO, CA 92103  Phone: (619) 260-7046	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

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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

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: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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, 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\None
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, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, 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

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MATOKA, 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, 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

NEONATAL / PERINATAL MEDICINE

MATOKA, NANA

Provider ID: 310508

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

3665 KEARNY VILLA RD
STE 400

SAN DIEGO, CA 92123

Phone: (858) 966-8801

Fax: (858) 966-8528

After Hours Phone: (858)
966-8801

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

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

NEONATAL / PERINATAL MEDICINE

MATOKA, 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, 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

NEONATAL / PERINATAL MEDICINE

MATOKA, 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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s)
Spoken: Japanese
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

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\18
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
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: 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

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D. دليل مقدمي الخدمات المتخصصين

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	Min/Max Age: 0\18 American Sign Language (ASL): 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
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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL Medi-Cal Open Panel: Yes	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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\18 American Sign Language (ASL):	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, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY

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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL, PALOMAR
MEDICAL CENTER, 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

PHAM, BETTY
Provider ID: 310310
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
NPI: 1790217750
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, 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
Website: N/A
IPA: Rady Childrens Health Network

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
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\None

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 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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 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,
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

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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

DIEGO, 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-5PM

Website: N/A

IPA: Rady Childrens Health Network

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, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEPHROLOGY

RIFKIN, DENA

Provider ID: 311457

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (619) 543-6248

After Hours Phone: (619) 543-6248

Provider Gender: Female

NPI: 1578519203

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

NEPHROLOGY

SINGH, PRABHLEEN

Provider ID: 311033

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: 1235207234

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Punjabi

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	American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER	 Accessibility: CONTACT PROVIDER	 Accessibility: CONTACT PROVIDER
 Website: N/A	 Hours: M-F 8AM-5PM	 Hours: M-F 8AM-5PM
IPA: UCSD Medical Group	 Website: N/A	 Website: N/A
	IPA: Community Care IPA LLC, IHP of Southern Cal-PHP	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: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, Los Angeles General Medical Center, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

NEPHROLOGY

ZHONG, YAN

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: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, Los Angeles General Medical Center, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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\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: Rady Childrens Health Network

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

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\18

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

 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

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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

NEUROLOGY

GHOLIPOUR, TAHA

Provider ID: 311496

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: 1801159611

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Persian

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

GHOLIPOUR, TAHA

Provider ID: 311495

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: 1801159611

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Persian

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

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
NETWORK

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

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D. دليل مقدمي الخدمات المتخصصين

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
SALLY THORNTON, 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 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: Rady Childrens Health Network	NEUROLOGY HEADLEY, ALISON Provider ID: 311599 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: 1386007383  Provider English 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	Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1831685577  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N
NEUROLOGY HEADLEY, ALISON Provider ID: 311598 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: 1386007383  Provider English 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	NEUROLOGY HEADLEY, ALISON Provider ID: 311599 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: 1386007383  Provider English 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	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, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None
NEUROLOGY ILICETO, ALESSANDRO Provider ID: 313506 Board Certified Specialty: No UCSD MEDICAL GROUP  200 W ARBOR DR SAN DIEGO, CA 92103  Phone: (800) 926-8273	NEUROLOGY ILICETO, ALESSANDRO Provider ID: 313506 Board Certified Specialty: No UCSD MEDICAL GROUP  200 W ARBOR DR SAN DIEGO, CA 92103  Phone: (800) 926-8273	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, 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): Provider ID: 311185

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 311468

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: Male

NPI: 1053326710

 Provider English 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

NEUROLOGY

JACQUES, KAYLA

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: 1538622014

 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

JACQUES, KAYLA

Provider ID: 311186

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: 1538622014

 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

JACQUES, KAYLA

Provider ID: 311184

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: 1538622014

 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

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA

Provider ID: 311523

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: 1871759084

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: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA

Provider ID: 311521

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-3500

After Hours Phone: (619)
543-3500

Provider Gender: Female

NPI: 1871759084

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

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

Fax: (619) 229-8006

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: UC SAN
DIEGO HEALTH - EAST

CAMPUS 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

NEUROLOGY

KIM MCMANUS, 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

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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL SAN DIEGO, UCSD N

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

LAVERTY, CHAMINDRA

Provider ID: 303258

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: 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\None

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: 311572

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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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 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

MAHTA, ALI
 Provider ID: 314332
 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: 1437387990
 Provider 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

PASSIAK, BRITTANY
 Provider ID: 311209
 Board Certified Specialty: No
 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

 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: 1467949693
 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
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

NEUROLOGY

PASSIAK, BRITTANY

Provider ID: 311208
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: 1467949693
 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
 Website: N/A
IPA: Rady Childrens Health
Network, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): **RIGGINS, NINA**

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

Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER, 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

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, 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

SHIH, JERRY

Provider ID: 311472

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: 1790774156

 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

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY

Provider ID: 311473

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: Male

NPI: 1790774156

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

 **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
 **Website:** N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY

Provider ID: 311470
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-3500
Fax: (619) 543-6806
 After Hours Phone: (619) 543-3500
Provider Gender: Male
NPI: 1790774156

 **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

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\18
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-5PM

 **Website:** N/A
IPA: Rady Childrens Health
Network

NEUROLOGY

TECOMA, EVELYN

Provider ID: 311535
Board Certified Specialty: Yes
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: 1174556518

 **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

TECOMA, EVELYN

Provider ID: 311533
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (619) 543-3500
 After Hours Phone: (619) 543-3500

Provider Gender: Female
 NPI: 1174556518

 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

UNG, HOAMENG

Provider ID: 311433

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: 1619438363

 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

WU, VICTORIA

Provider ID: 313037

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: 1649833039

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, 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

YANG, JENNIFER

Provider ID: 301593

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: Female

NPI: 1528420619

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Chinese, Mandarin
 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

ZALE, CHELSEA

Provider ID: 313034

Board Certified Specialty: No
 UCSD MEDICAL GROUP

 6655 ALVARADO RD
 SAN DIEGO, CA 92120

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858) 554-1212

Provider Gender: Female

NPI: 1548615495

 Provider 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

ZALE, CHELSEA

Provider ID: 313033

Board Certified Specialty: No
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858) 554-1212

Provider Gender: Female

NPI: 1548615495

 Provider 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

ZALE, CHELSEA

Provider ID: 313035

Board Certified Specialty: No
UCSD MEDICAL GROUP

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours Phone: (858) 554-1212

Provider Gender: Female

NPI: 1548615495

 Provider 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

966-5819
 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\18
 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

PASSIAK, BRITTANY

Provider ID: 314344
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 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: 1467949693
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Rady Childrens Health Network, UCSD Medical Group	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 Language(s) Spoken: Arabic, French Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N
NUCLEAR MEDICINE CHEHABI, HAZEM Provider ID: 314373 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: 1528172996  Provider English Spoken: Y  Provider Language(s) Spoken: Arabic, French	Provider Gender: Male NPI: 1528172996  Provider English Spoken: Y  Provider Language(s) Spoken: Arabic, French 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	 Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group
NUCLEAR MEDICINE CHEHABI, HAZEM Provider ID: 314373 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: 1528172996  Provider English Spoken: Y	NUCLEAR MEDICINE CHEHABI, HAZEM Provider ID: 314371 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: 1790149425  Provider English Spoken: Y	OBSTETRICS / GYNECOLOGY ASHAK, DANI Provider ID: 311189 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: 1790149425  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  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>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 311190 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: 1790149425 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 Website: N/A IPA: UCSD Medical Group	926-8273 Provider Gender: Male NPI: 1790149425 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 Website: N/A IPA: UCSD Medical Group	N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group
<u>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 311191 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)	<u>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 311192 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: 1790149425 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):	<u>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 311193 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: Male NPI: 1790149425 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 Website: N/A IPA: UCSD Medical Group
<u>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 316164 Board Certified Specialty: No UCSD MEDICAL GROUP	<u>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 316164 Board Certified Specialty: No UCSD MEDICAL GROUP	<u>OBSTETRICS / GYNECOLOGY</u> ASHAK, DANI Provider ID: 316164 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

6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1790149425

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

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

BIVER, LAURA

Provider ID: 316147

Board Certified Specialty: No

UCSD MEDICAL GROUP

6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1669091427

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

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):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: SHARP
MEMORIAL HOSPITAL, 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

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, 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

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, 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

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, 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

DELCore, LAURA

Provider ID: 316018
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6030 VILLAGE WAY STE
200
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: SHARP
MEMORIAL HOSPITAL, 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

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, 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

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, 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

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, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MEMORIAL HOSPITAL, 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

DRIEBE, AMY

Provider ID: 316026

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6030 VILLAGE WAY STE
200

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, 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

FERRANDO, CECILE

Provider ID: 311105

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: 1255592325

 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

 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

GREINER, KAREN

Provider ID: 313593

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: 1427686930

 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

OBSTETRICS / GYNECOLOGY

GREINER, KAREN

Provider ID: 313595
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: 1427686930

 Provider 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

OBSTETRICS / GYNECOLOGY

GREINER, KAREN

Provider ID: 313597
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: 1427686930

 Provider 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

OBSTETRICS / GYNECOLOGY

GREINER, KAREN

Provider ID: 313596
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: 1427686930

 Provider 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

OBSTETRICS / GYNECOLOGY

GREINER, KAREN

Provider ID: 316128
Board Certified Specialty: No
UCSD MEDICAL GROUP

 6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1427686930

 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 0\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
 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: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 618-1156

Provider Gender: Female

NPI: 1679517239

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: 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-TH 8:30AM-4:30PM F 8:30AM-2PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

OBSTETRICS / GYNCOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285519

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: 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, 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: UCSD Medical Group

OBSTETRICS / GYNCOLOGY

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, 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: UCSD Medical Group

OBSTETRICS / GYNCOLOGY

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): **MACKAY, GILLIAN**

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

Provider ID: 316180

Board Certified Specialty: No
UCSD MEDICAL GROUP

 6030 VILLAGE WAY STE
200

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

MCKINNEY, SARA

Provider ID: 311112

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: 1558708297

 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

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA

Provider ID: 311113

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: 1558708297

 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	 4910 DIRECTORS PL SAN DIEGO, CA 92121  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273	MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 16\None American Sign Language (ASL): N
OBSTETRICS / GYNECOLOGY	Provider Gender: Female	 Accessibility: CONTACT PROVIDER
MCKINNEY, SARA Provider ID: 311114 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: 1558708297  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  Website: N/A IPA: UCSD Medical Group	NPI: 1558708297  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  Website: N/A IPA: UCSD Medical Group	 Website: N/A IPA: UCSD Medical Group
OBSTETRICS / GYNECOLOGY	OBSTETRICS / GYNECOLOGY	OBSTETRICS / GYNECOLOGY
MCKINNEY, SARA Provider ID: 311115 Board Certified Specialty: No UCSD MEDICAL GROUP	MCKINNEY, SARA Provider ID: 311116 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: 1558708297  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD	MCKINNEY, SARA Provider ID: 316057 Board Certified Specialty: No UCSD MEDICAL GROUP  6030 VILLAGE WAY STE 200 SAN DIEGO, CA 92130  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1558708297  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  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

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

Hospital Affiliation: 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

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

Hospital Affiliation: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MESINA, OMAR

Provider ID: 316114

Board Certified Specialty: No
UCSD MEDICAL GROUP

6030 VILLAGE WAY STE
200

SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609403070

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

NUTAITIS, ALEXANDRA

Provider ID: 313548

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: 1548897770

Provider 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

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA

Provider ID: 313546

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: 1548897770

Provider 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

OBSTETRICS / GYNECOLOGY

QENDRO, ISABELLA

Provider ID: 316086

Board Certified Specialty: No
UCSD MEDICAL GROUP

6030 VILLAGE WAY STE
200

SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1285261602

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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: 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

THOMSON, SAMANTHA

Provider ID: 285176

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

VARON, SHIRA

Provider ID: 316167

Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE STE
150
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619047545

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

Website: N/A

IPA: UCSD Medical Group

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

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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

JEFFERIES, KATHLEEN

Provider ID: 311346

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: 1144410648

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

OCCUPATIONAL THERAPIST

LARSEN, JULIE

Provider ID: 258359

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

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

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D. دليل مقدمي الخدمات المتخصصين

SHELTON, 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

ALLEN, RACHAEL

Provider ID: 315301

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: 1801275391

Provider 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

OPHTHALMOLOGY

ALLEN, RACHAEL

Provider ID: 315303

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: 1801275391

Provider 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

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, PALOMAR MEDICAL

CENTER, PALOMAR MEDICAL

CENTER

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

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

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

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,
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: 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

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D. دليل مقدمي الخدمات المتخصصين

Fax: (858) 966-7403

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313685

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: 1568995397

☐ Provider 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

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313681

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: Female

NPI: 1568995397

☐ Provider 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

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER

Provider ID: 313496

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: 1891730073

☐ Provider 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

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER

Provider ID: 313499

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: 1891730073

☐ 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):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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: 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, 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

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, 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

OPHTHALMOLOGY

HOYT, BRIGGS

Provider ID: 313716

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: Male

NPI: 1982232542

 Provider 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

OPHTHALMOLOGY

HOYT, BRIGGS

Provider ID: 313719

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: 1982232542

 Provider 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

OPHTHALMOLOGY

HSUEH, JESSICA

Provider ID: 313694

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: 1952927584

 Provider 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

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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) 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, 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

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D. دليل مقدمي الخدمات المتخصصين

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\None
 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: 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, PALOMAR MEDICAL CENTER, 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

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, 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, UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA

Provider ID: 311099
 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

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174152961

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

OPHTHALMOLOGY

NAYER, ZACHARIA

Provider ID: 311098

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: 1174152961

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

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, 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: Rady Childrens Health
Network

OPHTHALMOLOGY

PETERSON, JONATHAN

Provider ID: 314350

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: 1124641071

Provider 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

OPHTHALMOLOGY

PETERSON, JONATHAN

Provider ID: 313539

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: 1124641071

 Provider 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

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, 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

OPHTHALMOLOGY

VAIL, DANIEL

Provider ID: 313582

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: 1285262568

 Provider 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

OPHTHALMOLOGY

VAIL, DANIEL

Provider ID: 313579

Board Certified Specialty: No
UCSD MEDICAL GROUP

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285262568

 Provider 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

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

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D. دليل مقدمي الخدمات المتخصصين

 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

OPHTHALMOLOGY

YAMANE, MAYA

Provider ID: 311884

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: 1124580139

 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

 Website: N/A

IPA: Rady Childrens Health

Network

OPHTHALMOLOGY

YAMANE, MAYA

Provider ID: 311886

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: 1124580139

 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

 Website: N/A

IPA: Rady Childrens Health
Network

OPTOMETRIST

DUONG, NGHI

Provider ID: 314752

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: 1285832501

 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: 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

OPTOMETRIST DUONG, NGHI Provider ID: 314750 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: 1285832501 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: IHP of Southern Cal-PHP	After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1861164642 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	N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group
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	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 Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	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 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 SCHWAB, GARY Provider ID: 290410 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

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

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): Provider ID: 304147

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

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

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: 1639697451

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

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: 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

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: 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

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

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 304727

Board Certified Specialty: No
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

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 273663

Board Certified Specialty: No
RADY CHILDRENS HEALTH
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

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

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

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

Hospital Affiliation: UCSD
MEDICAL CTR

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

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
 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

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\None
 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: 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\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A
 IPA: Rady Childrens Health
 Network

OTOLARYNGOLOGY

CATES, DANIEL

Provider ID: 311486
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 9333 GENESEE AVE
 SAN DIEGO, CA 92121

 Phone: (858) 657-8590
 Fax: (888) 539-8781

 After Hours Phone: (858)
 657-8590

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: 1821352907

 Provider English Spoken: Y

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

OTOLARYNGOLOGY

CHANG, EDWARD

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

OTOLARYNGOLOGY

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
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: 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

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

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D. دليل مقدمي الخدمات المتخصصين

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 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): Board Certified Specialty: No
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: 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

OTOLARYNGOLOGY

FRANK, ETHAN

Provider ID: 310278

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: Male

NPI: 1720584345

 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\18

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: 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) 926-8273

Provider Gender: Female

NPI: 1003825571

 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

 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

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

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

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

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

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

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
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

 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: 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

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

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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

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

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 WHITTIER HOSPITAL, 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: 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 WHITTIER HOSPITAL, 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 WHITTIER HOSPITAL, 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

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 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, 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: 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,
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: 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
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,
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: 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,
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: Rady Childrens Health
Network, UCSD Medical Group

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 272767

Board Certified Specialty: Yes

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D. دليل مقدمي الخدمات المتخصصين

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, PIONEERS MEMORIAL 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: Rady Childrens Health

Network, 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

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

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

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

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

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

PATEL, VIJAY

Provider ID: 297037

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN

Provider ID: 311002

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: Male

NPI: 1356796783

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

Website: N/A

IPA: Rady Childrens Health

Network

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

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D. دليل مقدمي الخدمات المتخصصين

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: 299509
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: 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: 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, 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

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, 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: 299642
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: 1346270816

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN 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

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

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299614
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

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

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

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)

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D. دليل مقدمي الخدمات المتخصصين

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: 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: 298412
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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

PATHOLOGY ANATOMIC

CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 313291

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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

 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

 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

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

MCKNIGHT, TRISTAN

Provider ID: 311761

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: Male

NPI: 1063940567

 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

 Website: N/A

IPA: Rady Childrens Health
Network

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

 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

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): **STEPHENS, LAURA**
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
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

PATHOLOGY ANATOMIC CLINICAL

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
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

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

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D. دليل مقدمي الخدمات المتخصصين

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

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: 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

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

PEDIATRIC ALLERGY /

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D. دليل مقدمي الخدمات المتخصصين

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: UC SAN
DIEGO HEALTH - EAST

CAMPUS 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: Rady Childrens Health
Network

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

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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
Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205697

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5776 RUFFIN RD

SAN DIEGO, CA 92123

Phone: (858) 966-4900

After Hours Phone: (858)
966-4900

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D. دليل مقدمي الخدمات المتخصصين

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-12PM

 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: 314178

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL
2

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 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

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D. دليل مقدمي الخدمات المتخصصين

 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

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\None

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

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D. دليل مقدمي الخدمات المتخصصين

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1760691950

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH

Provider ID: 313252
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: 1235634015

 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

LEHNERT SCHUCHARDT, 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

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D. دليل مقدمي الخدمات المتخصصين

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\None
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: 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

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

SILVA SEPULVEDA, 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, PIONEERS 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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D. دليل مقدمي الخدمات المتخصصين

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\None

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

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

WANG-GIUFFRE, ELIZABETH

Provider ID: 315246

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: 1265797591

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

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):

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N

 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\18

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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, 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

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, 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

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

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (619) 280-2905
 Provider Gender: Female
 NPI: 1851927883
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 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

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\18
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ALAYARI, AMETHYST

Provider ID: 311382
 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: Female
 NPI: 1740778653
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s)

Spoken: Farsi
 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

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

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D. دليل مقدمي الخدمات المتخصصين

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\None
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
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
 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

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D. دليل مقدمي الخدمات المتخصصين

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

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\None

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: 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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY

MEDICINE

CRAWFORD, MICHAEL

Provider ID: 311159

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: 1336727791

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSPITAL OF

ORANGE COUNTY, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

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

CRAWFORD, MICHAEL

Provider ID: 311158

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: 1336727791

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSPITAL OF

ORANGE COUNTY, 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

PEDIATRIC EMERGENCY

MEDICINE

DEL RE, ANGELO

Provider ID: 206081

Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. دليل مقدمي الخدمات المتخصصين

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
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, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\18

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,
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

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

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D. دليل مقدمي الخدمات المتخصصين

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
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\None
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: 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: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 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

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, 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

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302317

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905
Fax: (619) 283-1614

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D. دليل مقدمي الخدمات المتخصصين

 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\18

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

KRAK, MICHAEL

Provider ID: 310975

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: 1063094225

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 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, 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, UCSD Medical Group

PEDIATRIC 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

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D. دليل مقدمي الخدمات المتخصصين

RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD MEDICAL
CTR

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: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCEVOY, ANNE

Provider ID: 310789

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: Female

NPI: 1861888471

 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

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295668

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: 1134681265

 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: 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, SOUTHWEST
HEALTHCARE INLAND
VALLEY 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

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D. دليل مقدمي الخدمات المتخصصين

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

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, 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

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

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D. دليل مقدمي الخدمات المتخصصين

 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\None

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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Website: N/A Hours: M-F 8AM-5PM IPA: Rady Childrens Health Network	Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network	M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network
<u>PEDIATRIC EMERGENCY MEDICINE</u> 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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N	<u>PEDIATRIC EMERGENCY MEDICINE</u> 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 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	<u>PEDIATRIC EMERGENCY MEDICINE</u> PARKER, SHERINE Provider ID: 311083 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: 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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): Network N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network	IPA: Rady Childrens Health
<u>PEDIATRIC EMERGENCY MEDICINE</u> 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	<u>PEDIATRIC EMERGENCY MEDICINE</u> 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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A	<u>PEDIATRIC EMERGENCY MEDICINE</u> ROBERTS, CALE Provider ID: 310782 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: 1316430499  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, 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 <u>PEDIATRIC EMERGENCY</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

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

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 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\None

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

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D. دليل مقدمي الخدمات المتخصصين

DIEGO, 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

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
American Sign Language (ASL):

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
Hospital Affiliation: 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: 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\18
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
Provider ID: 301635
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL

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D. دليل مقدمي الخدمات المتخصصين

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\18
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 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
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\None
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, 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

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

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D. دليل مقدمي الخدمات المتخصصين

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\18

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS 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

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: Rady Childrens Health Network

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):

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

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

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D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM  Website: N/A IPA: Rady Childrens Health Network	Network <u>PEDIATRIC EMERGENCY MEDICINE</u> VAN WOY, LAUREN Provider ID: 301574 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	Provider ID: 205883 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
<u>PEDIATRIC EMERGENCY MEDICINE</u> 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	 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	 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\None American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER  Website: N/A IPA: Rady Childrens Health Network	<u>PEDIATRIC EMERGENCY MEDICINE</u> VANE, JACKSON	<u>PEDIATRIC EMERGENCY MEDICINE</u> VAYNGORTIN, TATYANA Provider ID: 263012 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: 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

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY MEDICINE

VEGA, CAROLINA

Provider ID: 310690

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: Female

NPI: 1427442086

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

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

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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY MEDICINE

WANG, YVETTE

Provider ID: 263416

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: 1710321278

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL

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.

D. دليل مقدمي الخدمات المتخصصين

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

YAPHOCKUN, KAREN KIM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

PEDIATRIC ENDOCRINOLOGY

ARAFAH, DEEMA

Provider ID: 310289

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: 1235423856

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

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

 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

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D. دليل مقدمي الخدمات المتخصصين

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

RANADIVE, SAYALI

Provider ID: 311394

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: 1588846380

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Hindi,
Marathi, 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-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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC ENDOCRINOLOGY

VARGAS TRUJILLO, 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

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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

Min/Max Age: 0\None

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

IPA: Rady Childrens Health

PEDIATRIC

GASTROENTEROLOGY

DICKERSON, ANDREW

Provider ID: 310619

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: 1063916633

 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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

PEDIATRIC

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

PEDIATRIC

GASTROENTEROLOGY

DICKERSON, ANDREW

Provider ID: 310617

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: 1063916633

 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

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

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

JAZAYERI, AMIR

Provider ID: 310952

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: 1316385925

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

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC

GASTROENTEROLOGY

KATIBIAN, DAVID

Provider ID: 310954

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

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1073019279

☑ 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

🌐 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 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

SHARMA, ANITA

Provider ID: 311774

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: 1871989335

☑ 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Rady Childrens Health Network	 Website: N/A IPA: Rady Childrens Health Network	ONCOLOGY CHOO, SUN Provider ID: 206115 Board Certified Specialty: No 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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM	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 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 /	PEDIATRIC HEMATOLOGY / ONCOLOGY ELSTER, JENNIFER Provider ID: 205769 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

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\None

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
Provider Language(s)

Spoken: Chinese, 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.

D. دليل مقدمي الخدمات المتخصصين

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

PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, KINCHEON

Provider ID: 311644

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: 1154095990

 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

 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LIYOU, ANGELA

Provider ID: 310982

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: 1598150450

 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

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

SRIDHAR, SUNITA

Provider ID: 302088

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

WON, ERIC

Provider ID: 315228
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: 1497192710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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\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, 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\None

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

 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

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON

Provider ID: 312985

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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: Male

NPI: 1689036436

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\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON

Provider ID: 312987

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: 1689036436

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\18
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON

Provider ID: 311377

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8574
Fax: (858) 966-7789

After Hours Phone: (858) 966-8574

Provider Gender: Male

NPI: 1689036436

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\18

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 NEPHROLOGY

EPPERSON, KATRINA

Provider ID: 312257

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8574
Fax: (858) 966-7789

After Hours Phone: (858) 966-8574

Provider Gender: Female

NPI: 1427435825

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-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

EPPERSON, KATRINA

Provider ID: 312256

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 4405 VANDEVER AVE STE 5

SAN DIEGO, CA 92120

 Phone: (619) 516-6181

Fax: (619) 516-6145

 After Hours Phone: (619) 516-6181

Provider Gender: Female

NPI: 1427435825

 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-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

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

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

PEDIATRIC NEPHROLOGY

PERENS, ELLIOT

Provider ID: 302765

Board Certified Specialty: No

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN

Provider ID: 310300

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8574
Fax: (858) 966-7789

After Hours Phone: (858) 966-8574

Provider Gender: Female

NPI: 1609365402

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

Website: N/A

IPA: Rady Childrens Health Network

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, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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
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

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D. دليل مقدمي الخدمات المتخصصين

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 DIEGO, UCSD MEDICAL CTR
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: 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

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D. دليل مقدمي الخدمات المتخصصين

 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, LONG BEACH

MEMORIAL MED CTR

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: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, 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

LANDEO GUTIERREZ, 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
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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8:30AM-4:30PM  Website: N/A IPA: Rady Childrens Health Network	 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 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 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	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	PEDIATRIC PULMONOLOGY TANTISIRA, KELAN Provider ID: 277183 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK
 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM	 Website: N/A IPA: Rady Childrens Health Network	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC RHEUMATOLOGY

LEVY, AVIYA

Provider ID: 310780

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8082

Fax: (858) 966-6791

 After Hours Phone: (858)
966-8082

Provider Gender: Female

NPI: 1144726936

 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

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC RHEUMATOLOGY

PHADKE, OMKAR

Provider ID: 315124

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1598140238

 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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRICS
ALAGIRI, MADHU
 Provider ID: 206387
 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: 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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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
 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\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 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\21
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Network

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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

PEDIATRICS

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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\18
 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: 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

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

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\18
 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: 205330
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 📍 3030 CHILDRENS WAY STE 300
 SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

 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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

EARLEY, SAMANTHA

Provider ID: 311738

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: 1144647520

 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

 Website: N/A

IPA: 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, UCSD MEDICAL CTR

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: 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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRICS

JIMENEZ BACARDI, 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, 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

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\18

American Sign Language (ASL): N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
 Network

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 966-5841

Provider Gender: Female

NPI: 1053672444

☐ 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

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\18

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRICS

MANNINO AVILA, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Rady Childrens Health Network

PEDIATRICS

MILLS, TATYANA

Provider ID: 310307
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female
NPI: 1962964999

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian

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

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

MILLS, TATYANA

Provider ID: 310308
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: 1962964999

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian

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

 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

NGO, MAI

Provider ID: 302114
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

 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): Network

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

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1871813105

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRICS

POOLE, DAVID

Provider ID: 311153
 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: 1033613765

 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

 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

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

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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\18
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRICS

SAWYER, CAROLYN

Provider ID: 315877
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: 1043653249

 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\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
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

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
Min/Max 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: 287453
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None

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\18

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
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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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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

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: PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
UC SAN DIEGO HEALTH -

EAST CAMPUS 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: 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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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
F 8:30AM-5PM

 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

DU, SARAH

Provider ID: 311792
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: Female
NPI: 1295502763

 Provider 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

DU, SARAH

Provider ID: 310603
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 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: Female
NPI: 1295502763

 Provider 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

GEBAUER, HEATHER

Provider ID: 311549
Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR 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 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 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1467987586
 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
 Website: N/A
 IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
 Provider ID: 311550
 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: 1467987586
 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
 Website: N/A
 IPA: UCSD Medical Group

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
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

HERNANDEZ, GABRIELA

Provider ID: 306325

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: 1417635392

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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

HSIEH, STEPHANIE

Provider ID: 312497

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (877) 673-1361

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1720868045

 Provider 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

LAMBERT, GAGE

Provider ID: 214788

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: Male
 NPI: 1144672494
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, 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
 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

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
 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

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
 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

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH
 Provider ID: 280611
 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
 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: 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
 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

MOREO, HUNTER
 Provider ID: 310136
 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: 1043062334
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MOREO, HUNTER
 Provider ID: 310726
 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: Female
 NPI: 1043062334
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR MEDICAL CENTER, 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

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NAKAMITSU, ABIGAIL

Provider ID: 268666
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 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
Network

PHYSICIANS ASSISTANT

NASSAR, JEANNE

Provider ID: 312724

Board Certified Specialty: No
UCSD MEDICAL GROUP

 2131 3RD AVE
SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1760704761

 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: UCSD Medical Group

PHYSICIANS ASSISTANT

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

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

PHYSICIANS ASSISTANT

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

NPI: 1427312644

 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

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D. دليل مقدمي الخدمات المتخصصين

 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

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

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

Provider Gender: Male

NPI: 1356749451

 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

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
 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

PHUNG, AIVI

Provider ID: 293247
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 6973 LINDA VISTA 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.

D. دليل مقدمي الخدمات المتخصصين

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

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
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POGGI, SARA
 Provider ID: 310631
 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: Female
 NPI: 1265119911

 Provider 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

POGGI, SARA

Provider ID: 310614
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 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: Female
 NPI: 1265119911
 Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 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

PRIEST, VIVIAN
 Provider ID: 313298
 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: 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
 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
 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

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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

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\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 316727

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: 1780851253

 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

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

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

SERHAN, STEPHANIE

Provider ID: 312856

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: 1487438750

 Provider 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

SERHAN, STEPHANIE

Provider ID: 312857

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: 1487438750

 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
 Website: N/A
 IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SHAPIRO, RACHEL
 Provider ID: 311469
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

 9333 GENESEE AVE STE 220
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1720488836
 Provider English 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

PHYSICIANS ASSISTANT

SMITH, TREVOR
 Provider ID: 313669
 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: 1821573718
 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

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
 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

TAN, CARMELA
 Provider ID: 311088
 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: 1811069271
 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

PHYSICIANS ASSISTANT

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D. دليل مقدمي الخدمات المتخصصين

TAN, CARMELA

Provider ID: 311091

Board Certified Specialty: No
UCSD MEDICAL GROUP

6645 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811069271

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

PHYSICIANS ASSISTANT

TAN, CARMELA

Provider ID: 311089

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: 1811069271

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

PHYSICIANS ASSISTANT

THOMAS, THEA

Provider ID: 312694

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: 1457718843

Provider 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

THOMAS, THEA

Provider ID: 312695

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: 1457718843

Provider 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

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
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

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
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

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) 900-2779

 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: 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

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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

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)
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: 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

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,

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: IHP of Southern Cal-PHP,
UCSD Medical Group

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 293290

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D. دليل مقدمي الخدمات المتخصصين

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: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

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: 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,

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,
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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): Board Certified Specialty: No
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

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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **BASS, GURGIANA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

Provider ID: 306550

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: 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-12PM

W 8AM-4:30PM

TH 8AM-12PM

 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):

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D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group	SAN DIEGO, CA 92111  Phone: (858) 279-0925  Fax: (858) 633-4680  After Hours Phone: (858) 279-0925 Provider Gender: Female NPI: 1114687803	 Accessibility: CONTACT PROVIDER  Website: N/A IPA: IHP of Southern Cal-PHP
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 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 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: 18\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	 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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

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

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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

PSYCHOLOGIST

MEIER, EMILY

Provider ID: 311351

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: 1255530572

 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

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

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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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

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

 After Hours Phone: (844) 757-5337

Provider Gender: Male

NPI: 1144685215

 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

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

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

PRINCE, RENEE

Provider ID: 303603

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: 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

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D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC

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

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):
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

REINEKE, ANKE

Provider ID: 315852

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

Phone: (858) 966-6974

Fax: (858) 966-6721

After Hours Phone: (858)
966-6974

Provider Gender: Female

NPI: 1205154747

Provider English Spoken: Y
Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PSYCHOLOGIST

REINEKE, ANKE

Provider ID: 315853

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8060 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-6974

Fax: (858) 966-6721

After Hours Phone: (858)
966-6974

Provider Gender: Female

NPI: 1205154747

Provider English Spoken: Y
Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PSYCHOLOGIST

SALO, STEPHANIE

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

SCHELLINGER, KRISTON

Provider ID: 213750

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

SCHELLINGER, 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

 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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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

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)

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

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D. دليل مقدمي الخدمات المتخصصين

 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 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
 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

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
 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
 Website: N/A
 IPA: UCSD Medical Group

PULMONARY DISEASES

CYPRO, ALEXANDER

Provider ID: 313679
 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: 1881126936

 Provider 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

HOGAN, NICHOLAS

Provider ID: 313713

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: 1861925273

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

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

 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

CTR

Medi-Cal Open Panel: Yes

Min/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: 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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

F 9AM-6PM
 SA 8AM-11AM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
PROVIDER
 Hours: M-W 9AM-5PM
 TH 8AM-1PM

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
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
PROVIDER
 Hours: M-W 9AM-5PM

PULMONARY DISEASES

LI, JINGHONG

Provider ID: 311032
 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: 1619014479
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON, 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: UCSD Medical Group

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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, 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

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

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

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

CARMONA, RUBEN

Provider ID: 316385

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

7901 FROST ST STE O
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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

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

Hospital Affiliation: UCSD

MEDICAL CTR

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: Rady Childrens Health
Network

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH

Provider ID: 314062

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 3366 5TH AVE

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D. دليل مقدمي الخدمات المتخصصين

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, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, 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

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
 Provider ID: 314064
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 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, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, 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

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
 Provider ID: 311196
 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: 1376689778
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO 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

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
 Provider ID: 311197
 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: 1376689778
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR
 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): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ALFIDI, MARY

Provider ID: 310666

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: 1992814396

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, KERN MEDICAL
CENTER

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

AWWAD, REEM

Provider ID: 311084

 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: 1811158967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD MEDICAL
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

AWWAD, REEM

Provider ID: 311085

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: 1811158967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD MEDICAL
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

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, 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

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, 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

BISSET, LOGAN

Provider ID: 311143

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: 1356760276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD MEDICAL

CTR, KERN 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

BISSET, LOGAN

Provider ID: 311144

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: 1356760276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD MEDICAL

CTR, KERN 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

BLACKWELL, CHRISTOPHER

Provider ID: 313488

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: 1740740125

 Provider 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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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER

Provider ID: 313484

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: 1740740125

Provider 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

BLACKWELL, CHRISTOPHER

Provider ID: 313485

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: 1740740125

Provider 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

BONE, SAMUEL

Provider ID: 311165

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: 1841216306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GEORGE L
MEE MEMORIAL HOSP, UC
DAVIS MEDICAL CTR, 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

BONE, SAMUEL

Provider ID: 311166

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: 1841216306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GEORGE L
MEE MEMORIAL HOSP, UC
DAVIS MEDICAL CTR, 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

BRANCH, CODY

Provider ID: 283675

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
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

RADIOLOGY DIAGNOSTIC

BROWN, TERESA

Provider ID: 311079

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: 1669492237

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN
LEANDRO HOSPITAL,
Highland Hospital, Alameda
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

RADIOLOGY DIAGNOSTIC

BROWN, TERESA

Provider ID: 311080

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: 1669492237

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN
LEANDRO HOSPITAL,
Highland Hospital, Alameda
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

RADIOLOGY DIAGNOSTIC

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

CARLSON, BLAKE

Provider ID: 311134

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: 1548249956

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Eisenhower
Medical Center, 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

CARLSON, BLAKE

Provider ID: 311135

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: 1548249956

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Eisenhower
Medical Center, 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

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,
UCSD MEDICAL CTR

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,
UCSD MEDICAL CTR

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: 304194

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (858) 554-1212

Fax: (858) 795-1195

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR,
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

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

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

CHENG, KAREN

Provider ID: 283228

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: 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

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

Medi-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

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

CHRISTENSEN, DIANA

Provider ID: 313647

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: 1578079786

Provider 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

CHRISTENSEN, DIANA

Provider ID: 313643

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: 1578079786

Provider 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

CHRISTENSEN, DIANA

Provider ID: 313644

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: 1578079786

Provider 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

CIRIELLO, JONATHAN

Provider ID: 313504

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: 1720540743

Provider 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

CIRIELLO, JONATHAN

Provider ID: 313500

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: 1720540743

Provider 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

CIRIELLO, JONATHAN

Provider ID: 313501

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: 1720540743

Provider 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

CRAMER, SCOTT

Provider ID: 313578

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: 1598225740

Provider 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

CRAMER, SCOTT

Provider ID: 313574

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: 1598225740

Provider 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

CRAMER, SCOTT

Provider ID: 313575

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: 1598225740

Provider 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

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

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

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

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

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

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286954

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL,

Providence Mission 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

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,

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

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 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: 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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

GERST, SCOTT

Provider ID: 311147

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: 1184602872

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, KERN 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

GERST, SCOTT

Provider ID: 311148

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: 1184602872

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, KERN 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

GORDON, EMILE

Provider ID: 311593

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: 1184121899

 Provider 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

GORDON, EMILE

Provider ID: 311594

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: 1184121899

 Provider 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

 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE

Provider ID: 311595
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: 1184121899

 Provider 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

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: 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

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D. دليل مقدمي الخدمات المتخصصين

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

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

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST

Provider ID: 311120

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: Male

NPI: 1366428351

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY HOSPITAL OF
THE MONTEREY PENINSULA,
MOUNTAINS COMMUNITY
HOSP, EISENHOWER

MEDICAL CTR, UCSD MEDICAL
CTR, KERN 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

HANSCH, ERNST

Provider ID: 311121

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: 1366428351

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY HOSPITAL OF
THE MONTEREY PENINSULA,
MOUNTAINS COMMUNITY
HOSP, EISENHOWER

MEDICAL CTR, UCSD MEDICAL
CTR, KERN 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

HELMY, MARWAH

Provider ID: 311095

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1841276730
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, MARK TWAIN MEDICAL CENTER, 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

RADIOLOGY DIAGNOSTIC

HELMY, MARWAH

Provider ID: 311096

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: 1841276730

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, MARK TWAIN MEDICAL CENTER, 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

RADIOLOGY DIAGNOSTIC

HURT, BRIAN

Provider ID: 313604

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: 1306370465

 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

HURT, BRIAN

Provider ID: 313600

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1306370465

 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

HURT, BRIAN

Provider ID: 313601

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: 1306370465

 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

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, 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

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, 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

Angeles General Medical Center, 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

KAKISH, DAVID

Provider ID: 313591
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: 1588123863

Provider 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

KAKISH, DAVID

Provider ID: 313587
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: 1588123863

Provider 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

KAKISH, DAVID

Provider ID: 313588
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: 1588123863

Provider 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
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

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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
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

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
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

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
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

LIM, GARRETT

Provider ID: 313545

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1396233565

 Provider 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

LIM, GARRETT

Provider ID: 313541

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: 1396233565

 Provider 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

LIM, GARRETT

Provider ID: 313542

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: 1396233565

 Provider 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

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, 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

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, 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

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO

Provider ID: 313779

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: 1649776915

 Provider 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

PANZARINI, BRUNO

Provider ID: 313775

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: 1649776915

 Provider 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

PANZARINI, BRUNO

Provider ID: 313776

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: 1649776915

 Provider 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

POHLEN, MICHAEL

Provider ID: 313561

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: 1285130906

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD

CHILDRENS HOSP, Stanford
Health Care, 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

POHLEN, MICHAEL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 313557
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: 1285130906

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD
CHILDRENS HOSP, Stanford
Health Care, 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

POHLEN, MICHAEL

Provider ID: 313558

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: 1285130906

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD

CHILDRENS HOSP, Stanford
Health Care, 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

RICKMAN, CHRISTOPHER

Provider ID: 311168

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: 1497759898

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence
St Joseph Hospital, SUTTER

COAST HOSPITAL, SUTTER
LAKESIDE HOSP, SUTTER
MATERNITY AND SURGERY
CENTER OF SANTA CRUZ,
MEMORIAL HOSPITAL MED
CTR, EISENHOWER MEDICAL
CTR, Alameda Hospital,
Alameda Hospital, Highland
Hospital, SAN LEANDRO
HOSPITAL, SAN LEANDRO
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

RICKMAN, CHRISTOPHER

Provider ID: 311169

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: 1497759898

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

St Joseph Hospital, SUTTER
COAST HOSPITAL, SUTTER
LAKESIDE HOSP, SUTTER
MATERNITY AND SURGERY
CENTER OF SANTA CRUZ,
MEMORIAL HOSPITAL MED
CTR, EISENHOWER MEDICAL
CTR, Alameda Hospital,

Alameda Hospital, Highland
Hospital, SAN LEANDRO
HOSPITAL, SAN LEANDRO
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

ROBINSON, ADAM

Provider ID: 313701

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: 1730685611

 Provider 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

ROBINSON, ADAM

Provider ID: 313697

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: 1730685611

 Provider 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

ROBINSON, ADAM

Provider ID: 313698

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: 1730685611

 Provider 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

ROTMAN, YONATAN

Provider ID: 313556

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: 1326542341

 Provider English Spoken: Y
Cultural Competency: N

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

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN

Provider ID: 313552

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: 1326542341

 Provider 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

ROTMAN, YONATAN

Provider ID: 313553

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: 1326542341

 Provider 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

ROZELL, JOSEPH

Provider ID: 311178

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: 1629368519

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR,
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

ROZELL, JOSEPH

Provider ID: 311179

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: 1629368519

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR,
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

SADAT, SAYED

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

Hospital Affiliation: CITY OF
HOPE NATIONAL MED CTR,
UCSD MEDICAL CTR, MAD
RIVER COMM HOSPITAL,
MOUNTAINS 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

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

Hospital Affiliation: CITY OF
HOPE NATIONAL MED CTR,
UCSD MEDICAL CTR, MAD
RIVER COMM HOSPITAL,
MOUNTAINS 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

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

Hospital Affiliation: CITY OF
HOPE NATIONAL MED CTR,

UCSD MEDICAL CTR, MAD
RIVER COMM HOSPITAL,
MOUNTAINS 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

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) 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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
 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

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

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

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR

Provider ID: 313566
 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: 1487117826
 Provider 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

SHWAIKI, OMAR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 313562
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: 1487117826

Provider 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

SHWAIKI, OMAR

Provider ID: 313563

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: 1487117826

Provider 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: 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
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: 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

SPARKS, CHELSEA

Provider ID: 313627

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
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1366901662

 Provider 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

SPARKS, CHELSEA

Provider ID: 313623

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: 1366901662

 Provider 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

SPARKS, CHELSEA

Provider ID: 313624

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: 1366901662

 Provider 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

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, 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

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

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, 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

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

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

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309703

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: 1598738577

 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

RADIOLOGY DIAGNOSTIC

SUN, ALEX

Provider ID: 311562

Board Certified Specialty: No
UCSD MEDICAL GROUP

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-2218

 After Hours Phone: (619)
543-2218

Provider Gender: Male

NPI: 1538502331

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

GROSSMONT HOSPITAL,

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: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX

Provider ID: 311564

Board Certified Specialty: No
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (619) 471-9240

 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.

D. دليل مقدمي الخدمات المتخصصين

471-9240

Provider Gender: Male

NPI: 1538502331

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

GROSSMONT HOSPITAL,

GROSSMONT HOSPITAL

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: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX

Provider ID: 311565

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: 1538502331

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

GROSSMONT HOSPITAL,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: 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

Min/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: 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

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
 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

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

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

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

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

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

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,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, 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.

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: Community Care IPA LLC,
 IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
 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,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, 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

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
 Provider ID: 313708
 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: 1013440965
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR, 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

WANG, LAWRENCE

Provider ID: 313705
 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: 1013440965
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR, 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

WANG, LAWRENCE
 Provider ID: 313706
 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: 1013440965

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, 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

WELSH, RAYMOND

Provider ID: 314368
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: 1932370384
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GEORGE L
MEE MEMORIAL HOSP, UC
DAVIS 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

WELSH, RAYMOND

Provider ID: 314369
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: 1932370384

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GEORGE L
MEE MEMORIAL HOSP, UC
DAVIS 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

YIN, JANE

Provider ID: 313642
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: 1477014405
 Provider 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

YIN, JANE

Provider ID: 313638
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: 1477014405
 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): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group	 3010 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123  Phone: (858) 966-8863  Fax: (858) 966-7903  After Hours Phone: (858) 966-8863 Provider Gender: Male NPI: 1154559037	 After Hours Phone: (858) 966-8863 Provider Gender: Male NPI: 1154559037  Provider English Spoken: Y  Provider Language(s) Spoken: Korean Cultural Competency: N Hospital Affiliation: NATIVIDAD MEDICAL CENTER, 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  Website: N/A IPA: Rady Childrens Health Network
<u>RADIOLOGY DIAGNOSTIC</u> YIN, JANE Provider ID: 313639 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: 1477014405  Provider 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	 Provider English Spoken: Y  Provider Language(s) Spoken: Korean Cultural Competency: N Hospital Affiliation: NATIVIDAD MEDICAL CENTER, 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  Website: N/A IPA: Rady Childrens Health Network	<u>REGISTERED DIETITIAN / NUTRITIONIST</u> 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
<u>RADIOLOGY DIAGNOSTIC</u> YOO, RAPHAEL Provider ID: 310111 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	<u>RADIOLOGY DIAGNOSTIC</u> YOO, RAPHAEL Provider ID: 310112 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	

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D. دليل مقدمي الخدمات المتخصصين

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

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

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

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

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 DIETITIAN /

NUTRITIONIST

SHMARIAHU, SHELLY

Provider ID: 310802

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: 1881457521

 Provider 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 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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: 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
 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

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
 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

BALL, STEPHEN
 Provider ID: 311013
 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: 1437644044
 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

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

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D. دليل مقدمي الخدمات المتخصصين

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): IPA: UCSD Medical Group

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

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

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

BOEHMER, ALEXANDRA

Provider ID: 311058

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: 1528789856

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

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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: 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

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
PROVIDER

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

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	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	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
REGISTERED PHYSICAL THERAPIST	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	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 Hospital Affiliation: UCSD	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

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D. دليل مقدمي الخدمات المتخصصين

 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

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
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

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

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

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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: 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

Min/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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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):

N

 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

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

WILLMS, HANNAH

Provider ID: 314384

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: 1427603109

 Provider 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

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

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D. دليل مقدمي الخدمات المتخصصين

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): **DURNAN, CASSANDRA**

N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

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

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: 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)

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D. دليل مقدمي الخدمات المتخصصين

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
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N
 Website: N/A
 IPA: UCSD Medical Group

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: 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

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 COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286363

Board Certified Specialty: No
 UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE
 DR STE 2110

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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
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

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
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 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, 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 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

LOPEZ, NICOLE

Provider ID: 286366
Board Certified Specialty: No
UCSD MEDICAL GROUP
📍 4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

Min/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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

MASCH, JESSICA

Provider ID: 311552

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: 1902300445

Provider 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 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

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

ARMANI, AVA

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D. دليل مقدمي الخدمات المتخصصين

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

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

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D. دليل مقدمي الخدمات المتخصصين

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

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

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, UCSD MEDICAL
CTR
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.

D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group	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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, 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 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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, 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
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, 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		

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

GARCIA CABRERA, ANA

Provider ID: 311499

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: 1205330354

Provider 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 GENERAL

HOLLANDSWORTH, HANNAH

Provider ID: 310729

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: 1972954303

Provider English 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 GENERAL

HOLLANDSWORTH, HANNAH

Provider ID: 316732

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: 1972954303

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

 Website: N/A

IPA: UCSD Medical Group

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

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\None

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: 286356

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: 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: 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: 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

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,

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D. دليل مقدمي الخدمات المتخصصين

IHP of Southern Cal-PHP

SURGERY GENERAL

MUELLER, GEORGE

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

REEVES, JAMES

Provider ID: 311505

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: 1174059257

Provider 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 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

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D. دليل مقدمي الخدمات المتخصصين

 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

YELON, JAY

Provider ID: 314355

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: 1750379475

 Provider 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 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
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

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

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, TRI CITY MEDICAL CTR,

PALOMAR MEDICAL CENTER,

COLUSA 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

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

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, UCSD

MEDICAL CTR, 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: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN

Provider ID: 316060

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)

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D. دليل مقدمي الخدمات المتخصصين

926-8273
 Provider Gender: Male
 NPI: 1487107454
 Provider 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

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
 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 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

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☎ 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, 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 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

Hospital Affiliation: 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

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) 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

BOCKHORN, LAUREN

Provider ID: 313622

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: 1902369366

☑ Provider 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

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
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: 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

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

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

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 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

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D. دليل مقدمي الخدمات المتخصصين

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

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: 296446

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: 1659634699

 Provider 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: Rady Childrens Health
Network

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246466

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

 3030 CHILDRENS WAY FL

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 313520
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: 1972066785
☐ Provider 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

DIJANIC, CHRISTOPHER
Provider ID: 313482
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: 1295396281

☐ Provider 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

DWIGHT, KATHRYN
Provider ID: 316034
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: 1548797103
☐ Provider 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

GEORGE, JOSE

Provider ID: 313607

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: 1528528668

 Provider 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

GOEB, YANNICK

Provider ID: 284794

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

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

HURVITZ, ANDREW

Provider ID: 311579

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1083842371
 Provider 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

HURVITZ, ANDREW
 Provider ID: 311580
 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: 1083842371
 Provider 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

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\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

MICHEL, MATTHEW
 Provider ID: 314760
 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: Male
 NPI: 1992202956
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: Sharp Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
 Provider ID: 313512
 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: 1144783028
 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

Medi-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

SEDGHI, SOUDABEH

Provider ID: 313492

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: 1619438199

 Provider 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

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: 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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260953

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: 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
IPA: Rady Childrens Health Network

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

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\18

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 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

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D. دليل مقدمي الخدمات المتخصصين

 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

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): 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

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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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: Yes
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: 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\18

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

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D. دليل مقدمي الخدمات المتخصصين

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

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE

Provider ID: 310985

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 1

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858) 966-7711

Provider Gender: Male

NPI: 1598147050

Provider English Spoken: Y

Provider Language(s) Spoken: French

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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: 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: 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 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

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D. دليل مقدمي الخدمات المتخصصين

UCSD MEDICAL GROUP

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
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

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, 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

SURGERY PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 316714
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: 1497280028
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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 311376
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: 1497280028
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Rady Childrens Health
 Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 311448
 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: 1497280028

 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

 Website: N/A

IPA: Rady Childrens Health
 Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 311447

Board Certified Specialty: No

UCSD MEDICAL GROUP

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-8394

 After Hours Phone: (858)
 966-5999

Provider Gender: Male

NPI: 1497280028

 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 PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 311375

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-8394

 After Hours Phone: (858)
 966-5999

Provider Gender: Male

NPI: 1497280028

 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

 Website: N/A

IPA: Rady Childrens Health
 Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 311449

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: 1497280028

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: 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.

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: 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\None

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):
N

 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

 After Hours Phone: (858) 966-8030

Provider Gender: Male

NPI: 1780847533

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
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): Network

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, UCSD MEDICAL CTR

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: 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
Network

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL

Provider ID: 262192

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

8001 FROST ST

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

UROLOGY

ALBO, MICHAEL

Provider ID: 311548

Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE STE

220

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1912938499

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: 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

Website: N/A

IPA: UCSD Medical Group

UROLOGY

ALBO, MICHAEL

Provider ID: 313734

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: 1912938499

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: 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

Website: N/A

IPA: UCSD Medical Group

UROLOGY

BAGRODIA, ADITYA

Provider ID: 313884

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: 1730310665

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD 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.

D. دليل مقدمي الخدمات المتخصصين

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

UROLOGY

BECHIS, SETH

Provider ID: 313746

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: 1376863746

 Provider English 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

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

GRIFFITHS, LUKE

Provider ID: 316115

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: 1760945836

 Provider 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

KADER, ANDREW

Provider ID: 311541

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: 1184731127

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: 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

UROLOGY

MONGA, MANOJ

Provider ID: 313310

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: 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

 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

MONGA, MANOJ

Provider ID: 311516

Board Certified Specialty: No
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE
220

SAN DIEGO, CA 92121

 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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

MOORE, SARAH

Provider ID: 311610

Board Certified Specialty: No

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: 1538620760

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL 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: IHP of Southern Cal-PHP

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

SANTIAGO-LASTRA, YAHIR

Provider ID: 313690

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: 1699936609

 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: UCSD Medical Group

UROLOGY

SANTIAGO-LASTRA, YAHIR

Provider ID: 311487

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9333 GENESEE AVE STE
220

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1699936609

 Provider English Spoken: Y

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D. دليل مقدمي الخدمات المتخصصين

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: 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
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): IHP of Southern Cal-PHP
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): IHP of Southern Cal-PHP
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284664
Board Certified Specialty: Yes
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: 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,

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284665
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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

WOO, JASON

Provider ID: 313664

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: 1437380086

Provider English Spoken: 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

SAN MARCOS

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

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE **PRACTITIONER**

FLORES, BERTHA

Provider ID: 313780
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1942032602

 Provider 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**

FODDA, RAMI

Provider ID: 296603

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**

GARCIA, REGINA

Provider ID: 297837

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: 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 VALPRED 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

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE **PRACTITIONER**

KOHOUT, KATHRYN

Provider ID: 291105
 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: 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**

MUNOZ, EMMANUEL

Provider ID: 312286

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: Male

NPI: 1710366489

 Provider 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**

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

PARSONS, MEKRAE

Provider ID: 303220

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: 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

YCASAS, EMILY

Provider ID: 307853

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: 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 VALPRED 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,

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

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

Provider 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

WITCZAK, IZABELA

Provider ID: 316237

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

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D. دليل مقدمي الخدمات المتخصصين

 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: 1184735201

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Polish

Cultural Competency: N

Hospital Affiliation: 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 8AM-5PM

 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

 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

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

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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: Community Care IPA LLC	INTERVENTIONAL CARDIOLOGY SUDHAKAR, DEEPTHI Provider ID: 296052 Board Certified Specialty: No COMMUNITY CARE IPA LLC	 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: 1811307051
INTERVENTIONAL CARDIOLOGY SUDHAKAR, DEEPTHI Provider ID: 295847 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  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: 1811307051  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	 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: 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 English Spoken: Y Cultural Competency: N Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\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 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	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

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D. دليل مقدمي الخدمات المتخصصين

 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, TEMECULA VALLEY HOSPITAL INC
 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

HOSSEIN ZADEH MALEKI, 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
 NPI: 1316471485
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Persian
 Cultural Competency: N
 Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR, LOMA

LINDA UNIVERSITY
 CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY 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

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

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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

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, 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-6PM
 SA 9AM-12:30PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, 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, SHARP CHULA VISTA
 MED CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\None
 American Sign Language (ASL):
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-6PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 311881
 Board Certified Specialty: No
 IHP OF SOUTHERN CAL-PHP
 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Female
 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
 Medi-Cal Open 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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D. دليل مقدمي الخدمات المتخصصين

PEDIATRICS

LUM HO, 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\18

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

LUM HO, 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

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

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D. دليل مقدمي الخدمات المتخصصين

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

HERNANDEZ, MIRIAM

Provider ID: 298336

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: 1457903700

 Provider 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

NAVARRETE CELESTINO,

MISHEL

Provider ID: 302439

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: 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

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

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ARIELLA, LYNDIA

Provider ID: 299716
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 150 VALPREDIA 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

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FLYNN, DANIELLE

Provider ID: 290795
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 150 VALPREDIA 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\18

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 VALPREDIA 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 VALPREDIA 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

TORRES, HECTOR

Provider ID: 290788
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 150 VALPREDIA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767

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D. دليل مقدمي الخدمات المتخصصين

Fax: (760) 736-6744

☎ After Hours Phone: (760) 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

SAN YSIDRO

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

BUTLER, KELLEY

Provider ID: 310821

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 785-3384

☎ After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1316527286

☐ 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

FAMILY PRACTICE

BUTLER, KELLEY

Provider ID: 310820

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: 1316527286

☐ 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

FAMILY PRACTICE

CHOU, SUSANNA

Provider ID: 310842

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1104889724

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese, Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

FAMILY PRACTICE

GOLU, CRISTIANA

Provider ID: 310232

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: 1083684997

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Romanian

Cultural 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

NAVARRO, VANESSA MARIA

Provider ID: 297756

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. دليل مقدمي الخدمات المتخصصين

<u>FAMILY PRACTICE</u> ORTEGA, LUIS Provider ID: 295225 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: Male NPI: 1558924936 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-5PM Website: N/A IPA: IHP of Southern Cal-PHP	Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1902197544 Provider 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 <u>FAMILY PRACTICE GERIATRIC MEDICINE</u> BULOW, KWI Provider ID: 302346 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: 1073608576 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 8:30AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP <u>INFECTIOUS DISEASE</u> 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, 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
<u>FAMILY PRACTICE</u> QURESHI, SOFIA Provider ID: 308756 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: 1073608576 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 Website: N/A IPA: IHP of Southern Cal-PHP

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INFECTIOUS DISEASE

POLESKY, ANDREA

Provider ID: 315321

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: 1063517365

Provider English Spoken: Y

Provider Language(s)
Spoken: Tongan

Cultural Competency: N

Hospital Affiliation: SANTA

CLARA VALLEY 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

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, 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, 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-8PM
SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 310885

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 662-4196

After Hours Phone: (619)

662-4100

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

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

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

Provider Gender: Female

NPI: 1316146996

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):  Hours: M-F 8AM-8PM

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-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

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  Hours: M-F 8AM-8PM

N

 Accessibility: CONTACT PROVIDER

 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) 205-6305

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY 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-8PM
SA 8AM-2PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

KOBAYASHI, KAREN

Provider ID: 310881

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: 1497929517

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA 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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 315325

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

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D. دليل مقدمي الخدمات المتخصصين

Fax: (619) 205-6305

After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s) Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

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

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 313372

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 666-2410

Fax: (619) 205-6305

After Hours Phone: (619) 666-2410

Provider Gender: Female

NPI: 1154409035

Provider English Spoken: Y N

Provider Language(s) Spoken: Serbian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

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

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):

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

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

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D. دليل مقدمي الخدمات المتخصصين

SA 8AM-2:30PM
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
Fax: (619) 600-4870

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)
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) 662-4196

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

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

TEMECULA

CERTIFIED NURSE PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300260
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

 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

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

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

VALLEY CENTER

CERTIFIED NURSE PRACTITIONER

HOULE, STEPHANIE

Provider ID: 313722

Board Certified Specialty: No

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

Provider Gender: Female

NPI: 1003674847

 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

GALLO, PHILIP

Provider ID: 316198

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: 1760708465

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\65

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 ACUPUNCTURIST

GALLO, PHILIP

Provider ID: 315007

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: 1760708465

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\65

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 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

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) 414-3892

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,

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D. دليل مقدمي الخدمات المتخصصين

IHP of Southern Cal-PHP

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
Fax: (760) 414-3892

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

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

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

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

DECARLI, TASIA

Provider ID: 315334

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: 1598158768

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 8AM-8PM
TU-TH 9AM-8PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

F 9AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 315339
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: 1598158768
 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-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 315335

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: 1598158768
 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 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 314647
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 361-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
361-5000
Provider Gender: Male

NPI: 1528741287
 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
SA 9AM-4PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 314648
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: 1528741287
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IHP of Southern Cal-PHP
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

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 315953

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 361-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
361-5000

Provider Gender: Male

NPI: 1528741287

 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-F 8AM-5PM
SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 315954

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: 1528741287

 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,

IHP of Southern Cal-PHP

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: 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

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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

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

 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

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: 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

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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: Community Care IPA LLC,

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

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

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

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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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

 Provider Language(s)
Spoken: Spanish

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 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):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM

Provider ID: 315056

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: 1346079910

 Provider 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

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM

Provider ID: 315057

Board Certified Specialty: No

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

134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1346079910
Provider 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

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM
Provider ID: 314651
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: 1346079910
Provider 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

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM
Provider ID: 314652
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: 1346079910
Provider 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

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
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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D. دليل مقدمي الخدمات المتخصصين

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

Hours: M-F 8AM-8PM

Website: N/A

IPA: 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

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

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

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282163

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D. دليل مقدمي الخدمات المتخصصين

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, CORONA

REGIONAL MED CTR,

CORONA REGIONAL MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR, UCI

HEALTH-FOUNTAIN 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

HOSPICE AND PALLIATIVE

MEDICINE

RUBENZI, 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

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) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1467542175

Provider English Spoken: Y

Provider Language(s)

Spoken: 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-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: 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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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, 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

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: PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 12\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

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: 10\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-TH 8AM-7PM F 8AM-5PM SA 9AM-4PM
 🌐 Website: N/A
 IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

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: PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-TH 9AM-8PM
F 9AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: 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

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,
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

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
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

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

PHYSICIANS ASSISTANT

WHARRAM, JENNIFER

Provider ID: 314059

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 2067 W VISTA WAY STE 295
VISTA, CA 92083

 Phone: (760) 298-5787

Fax: (760) 560-2007

 After Hours Phone: (760)
298-5787

Provider Gender: Female

NPI: 1063168094

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SALINAS

VALLEY MEMORIAL HOSP

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

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: TRI CITY
MEDICAL CTR, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
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

PODIATRIST

MILLER, JULIE

Provider ID: 305464

Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD
VISTA, CA 92083

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D. دليل مقدمي الخدمات المتخصصين

 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: TRI CITY
MEDICAL CTR, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL,

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

REGISTERED PHYSICAL 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

 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

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

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

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D. دليل مقدمي الخدمات المتخصصين

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, 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

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

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 255940
Board Certified Specialty: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR

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D. دليل مقدمي الخدمات المتخصصين

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, SOUTHWEST HEALTHCARE INLAND VALLEY 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: 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, SOUTHWEST HEALTHCARE INLAND VALLEY 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: 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, 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

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
 Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 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

PULMONARY DISEASES

LEVERONE, NICHOLAS

Provider ID: 313304

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: Male

NPI: 1407388564

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, 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

 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
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, 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

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

GROSSMONT HOSPITAL ^{1 2 3}

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

Birthing Friendly: Y

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

 1940 EL CAJON BLVD
SAN DIEGO, CA 92104

 Phone: (619) 543-4500

 After Hours Phone: (619) 543-4500

Accepting New Patients: No
Min/Max Age: 0\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 ^{1 2 3}

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

PALOMAR MEDICAL CENTER ¹

^{2 3}

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

Birthing Friendly: Y

PALOMAR REHABILITATION INSTITUTE

Provider ID: 547653

 2181 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 277-6100

 After Hours Phone: (442) 277-6100

Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 550006213

NPI: 1831702398

 Website: <https://www.palomarhealthrehabinstitute.com>

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PARADISE VALLEY HOSPITAL^{1 2}

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 days/week

NPI: 1356410351

 Website: www.paradisevalleyhospital.net

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

RADY CHILDRENS HOSPITAL

SAN DIEGO^{2 3}

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:

JCAHO

 Hours: 24 Hours / 7 days/week

NPI: 1710065933

 Website: www.rchsd.org

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

SCRIPPS GREEN HOSPITAL^{1 2 3}

Provider ID: 171084

 10666 N TORREY PINES RD
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^{1 2 3}

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:

JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 080000050

NPI: 1841277704

 Website: www.scripps.org/locations/hospitals__scripps-memorial-hospital-la-jolla

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

SCRIPPS MEMORIAL

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

HOSPITAL ENCINITAS ^{1 2 3}

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-memorial-hospital-encinitas

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

SCRIPPS MERCY HOSPITAL ^{1 2 3}

Provider ID: 170048

 4077 5TH AVE STE 100
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-san-diego

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

SCRIPPS MERCY HOSPITAL CHULA VISTA ^{1 2}

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-chula-vista

sta

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

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

^{1 2}

Provider ID: 170251

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (619) 502-5800

 After Hours Phone: (619)

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

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
Birthing Friendly: Y

SHARP CORONADO HOSP AND HEALTHCARE CTR ^{1 2 3}

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
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 ^{1 2}

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: JCAHO

 Hours: 24 Hours / 7 days/week
License Number: 080000039
NPI: 1407839921
 Website: www.sharp.com
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

SHARP MEMORIAL HOSPITAL ^{1 2 3}

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: JCAHO
 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 ^{2 3}

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:  Hours: 24 Hours / 7 days/week
NPI: 1801861190

 Website: www.tricitymed.org
American Sign Language (ASL): N
 Accessibility: CONTACT

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

PROVIDER

Birth Friendly: Y

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER ^{1 2}

Provider ID: 685221

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (619) 287-3270

After Hours Phone: (619)
287-3270

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

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

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER ^{1 2}

Provider ID: 685221

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (619) 287-3270

After Hours Phone: (619)
287-3270

Accepting New Patients: No
Min/Max Age: 0\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

UCSD LA JOLLA JOHN SALLY THORNTON ^{1 2 3}

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:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1497021265

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

UCSD MEDICAL CTR ^{1 2 3}

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:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1184722779

Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصصة (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: teriinc.org
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

EL CAJON

KASEY'S HOME

Provider ID: 674600

1164 CRYSTAL LN
EL CAJON, CA 92020

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F 8AM-5PM
NPI: 1639392079

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FALLBROOK

VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR
FALLBROOK, CA 92028

Phone: (760) 731-2157

Fax: (760) 721-9872

After Hours Phone: (760)
731-2157

Accepting New Patients: No

NPI: 1962488007

Website: teriinc.org
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA MESA

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

SHASTA HOME

Provider ID: 674614

10346 CHALLENGE BLVD
LA MESA, CA 91941

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F 8AM-5PM
NPI: 1134342520

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OCEANSIDE

ANDRU HOME

Provider ID: 664438

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصصة (SNF)

 311 DEL FLORA ST
OCEANSIDE, CA 92058
 Phone: (760) 439-1741
Fax: (949) 218-1670
 After Hours Phone: (760) 439-1741
Accepting New Patients: No
 Hours: M-F 9AM-5PM
NPI: 1801981667
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

BRADY HOME

Provider ID: 664440
 4825 GLENHAVEN DR
OCEANSIDE, CA 92056
 Phone: (760) 295-4505
Fax: (949) 218-1670
 After Hours Phone: (760) 295-4505
Accepting New Patients: No
 Hours: M-F 9AM-5PM
NPI: 1760725766
 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
Accepting New Patients: No
NPI: 1962488007
 Website: teriinc.org
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MICHALOWSKI HOME

Provider ID: 662925
 4602 ALLENDE AVE
OCEANSIDE, CA 92057
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: teriinc.org
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

MONARCH HOME

Provider ID: 666883
 877 MUIRFIELD DR
OCEANSIDE, CA 92058
 Phone: (760) 231-8139
Fax: (760) 529-5148
 After Hours Phone: (760) 231-8139
Accepting New Patients: No
 Hours: M-F 8AM-5PM
NPI: 1760660336
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SAN MARCOS

CARLO HOUSE

Provider ID: 662931
 411 CARLO ST
SAN MARCOS, CA 92078
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: teriinc.org

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصصة (SNF)

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

AMBER HOME

Provider ID: 664436

305 CARLSON CT
VISTA, CA 92083

Phone: (760) 631-1527

Fax: (949) 218-1670

After Hours Phone: (760)
631-1527

Accepting New Patients: No

Hours: M-F 9AM-5PM

NPI: 1497924823

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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: teriinc.org
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: teriinc.org
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

HAYDEN HOME

Provider ID: 664442

822 GRANADA DR
VISTA, CA 92083

Phone: (760) 941-8052

Fax: (949) 218-1670

After Hours Phone: (760)
941-8052

Accepting New Patients: No
NPI: 1245400670

Website: N/A
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 المتخصصة (SNF)

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: teriinc.org
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: teriinc.org
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: teriinc.org
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: teriinc.org
Credentials and/or
certifications:

Site English Spoken: Y
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
NPI: 1962488007

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصصة (SNF)

 Website: teriinc.org

Credentials and/or

certifications:

 Site English Spoken: Y

Cultural Competency: N

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.

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

Medi-Cal: Y

Website: <http://openarmsadhc.com>

OPEN ARMS ADULT DAY

HEALTHCARE

Provider ID: 716620

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: 060000842

NPI: 1184494049

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

Medi-Cal: Y

Website: N/A

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

Medi-Cal: Y

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): N

Language line interpreter services: N

If Facility has completed cultural competence training?: N

N

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Medi-Cal: Y
Website: <http://magnoliaadhc.com>

WESTERN ADULT DAY HEALTH CARE CENTER

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 Languages(s) Spoken: Chaldean Neo-Aramaic, Spanish, Arabic, Tagalog, Farsi
Hours: M-F 7AM-3:30PM
License Number: 060000892
NPI: 1821125550
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
Medi-Cal: 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
Medi-Cal: Y
Website: N/A

NATIONAL CITY

HORIZON CBAS

Provider ID: 642082
1035 HARBISON AVE

NATIONAL CITY, CA 91950
Phone: (619) 474-1822
Fax: (619) 474-1826
After Hours Phone: (619) 474-1822
Accepting New Patients: No
Site Languages(s) Spoken: Spanish, Tagalog
Hours: M-F 8AM-4:30PM
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
Medi-Cal: Y
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

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

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

Medi-Cal: Y

 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

Medi-Cal: Y

 Website: www.casa-pacific.com

LEGACY CARE ADHC CBAS

Provider ID: 705308

 11239 CAMINO RUIZ STE A
SAN DIEGO, CA 92126

 Phone: (858) 348-4074

Fax: (858) 397-2151

 After Hours Phone: (858) 348-4074

Accepting New Patients: No

 Hours: M-F 8AM-5PM

License Number: 550009443

NPI: 1164298337

 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

Medi-Cal: Y

 Website: WWW.LEGACYADHC.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

Medi-Cal: Y

 Website: www.lovingcareadhc.com

SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018

 4428 CONVOY ST STE 288
SAN DIEGO, CA 92111

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

 Phone: (858) 244-4555	 After Hours Phone: (760) 682-2424
Fax: (858) 724-3302	
 After Hours Phone: (858) 244-4555	Accepting New Patients: No
Accepting New Patients: No	License Number: 060000832
 Site Language(s) Spoken: Vietnamese, Mandarin, Spanish	 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM	American Sign Language (ASL): N
License Number: 550005837	Language line interpreter services: N
NPI: 1396201828	If Facility has completed cultural competence training?: N
 Accessibility: CONTACT PROVIDER	Facility has access to skilled medical interpreters on site?: N
American Sign Language (ASL): N	Interpreter Non-English Languages: N
Language line interpreter services: Y	Medi-Cal: Y
If Facility has completed cultural competence training?: N	 Website: www.americareadhc.com
Facility has access to skilled medical interpreters on site?: N	
Interpreter Non-English Languages: Y	
Medi-Cal: Y	
 Website: Sandiegofamilycircle.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

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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/sdc/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 TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ALPINE

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
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: 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
Provider Language(s) Spoken: Spanish

Cultural Competency: N
DANI E CASTLEBERRY
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 824-9071
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
Provider Language(s) Spoken: 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
Hours: M-F 8AM-8PM
SA 8AM-4PM

CASTLEBERRY, DANI

Provider Gender: Female
License Number: LCS95022
NPI: 1053706853
Provider English Spoken: Y
Provider Language(s) Spoken: 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

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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-5PM

CELAYA, PATRICIA

Provider Gender: Female
License Number: PSY33233
NPI: 1952656902
Provider English Spoken: Y
Provider Language(s) Spoken: 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

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) 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

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

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١. دليل الصحة النفسية

 *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*

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: 14\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

Provider Language(s) Spoken: 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*

RIVERA, KEVIN JOHN

Provider Gender: Male

License Number: A193862

NPI: 1760986715

Provider English Spoken: Y

Cultural Competency: N

KEVIN JOHN R RIVERA

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

Fax: (619) 662-4196

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

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

 *Site Languages(s) Spoken: Spanish*

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

RIVERA, KEVIN JOHN

Provider Gender: Male

License Number: A193862

NPI: 1760986715

Provider English Spoken: Y

Cultural Competency: N

KEVIN JOHN R RIVERA

 678 THIRD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

Fax: (619) 662-4196

 *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

SHIELDS, SEBASTIAN

Provider Gender: Male
License Number: MFC124495
NPI: 1558895342
Provider English Spoken: Y
Provider Language(s) Spoken: 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

SUTHERLAND, PAIGE

Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U

Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

SUTHERLAND, PAIGE

Provider Gender: Female
License Number: A178168
NPI: 1235767245

Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
 678 THIRD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\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

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 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) 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

CRUZ, GUADALUPE

Provider Gender: Male
License Number: LCS101900
NPI: 1649727942
Provider English Spoken: Y

Provider Language(s) Spoken:
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):

KAHLY, BROOKE

Provider Gender: Female
License Number: LCS84367
NPI: 1649833120

Provider English Spoken: Y
Cultural Competency: N
BROOKE N KAHLY

 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

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Site English Spoken: Y

 Site Languages(s) Spoken:
Chinese, Farsi, Italian,
Japanese, Mandarin,
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

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

SADDA, REEM

Provider Gender: Female

License Number: A163129

NPI: 1871921833

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

REEM J SADDA

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 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

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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

 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

GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s) Spoken: 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

ROJAS, LEONOR

Provider Gender: Female

License Number: LCS124195

NPI: 1346728862

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

LEONOR ROJAS

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

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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

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

BECKMAN, KARI

Provider Gender: Female

License Number: LCS121629

NPI: 1861243271

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

KARI L BECKMAN

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

CASTILLO, TRINIDAD

Provider Gender: Female

License Number: LCS116651

NPI: 1508472911

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

TRINIDAD J CASTILLO

 488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

 Phone: (760) 466-9800

Fax: (360) 462-2741

 After Hours Phone: (760)
466-9800

 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

CASTILLO, TRINIDAD

Provider Gender: Female

License Number: LCS116651

NPI: 1508472911

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

TRINIDAD J CASTILLO

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900

 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

FU, KATHERINE

Provider Gender: Female

License Number: A187562

NPI: 1356877807

Provider English Spoken: Y

Cultural Competency: N

KATHERINE FU

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

KAHLY, BROOKE

Provider Gender: Female

License Number: LCS84367

NPI: 1649833120

Provider English Spoken: Y

Cultural Competency: N

BROOKE N KAHLY

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

LIM, STEVE

Provider Gender: Male

License Number: LCS122638

NPI: 1194590091

Provider English Spoken: Y

Cultural Competency: N

STEVE S LIM

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (760) 466-1373

 After Hours Phone: (760)
520-8100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Farsi, French, Urdu, 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

MARTINEZ, NORAYMA

Provider Gender: Female

License Number: LCS100019

NPI: 1669808267

Provider English Spoken: Y

Cultural Competency: N

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١. دليل الصحة النفسية

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

MCGHEE, JULEA

Provider Gender: Female
License Number: A95593
NPI: 1417016304
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
JULEA L MCGHEE
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300

 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

MORAN, CHRISTINA

Provider Gender: Female
License Number: PSY25925
NPI: 1063661577
Provider English Spoken: Y
Cultural Competency: N
CHRISTINA M MORAN
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\18
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

PENT, MICHELLE

Provider Gender: Female
License Number: C55145
NPI: 1275627655
Provider English Spoken: Y
Cultural Competency: N
MICHELLE P PENT
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

PRASAD, AMITHA

Provider Gender: Female
License Number: A158657

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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

Provider Language(s) Spoken:

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

Hours: M-F 8AM-5PM

RIVERA, MELISSA

Provider Gender: Female

License Number: MFC131285

NPI: 1184171720

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MELISSA N RIVERA

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\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

TEETER-WITT, ALYSSA

Provider Gender: Female

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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\18

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\18

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VENNAM, VAMSI KRISHNA

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

Provider English Spoken: Y

Cultural Competency: N

VAMSI KRISHNA 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

VERCHER, ROSHON

Provider Gender: Male

License Number: LCS101363

NPI: 1316611288

Provider English Spoken: Y

Cultural Competency: N

ROSHON VERCHER

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: 12\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FALLBROOK

GILROY, LAURA

Provider Gender: Female

License Number: LCS27123

NPI: 1437427978

Provider English Spoken: Y

Provider Language(s) Spoken:

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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

MAURIZ, GRAZIANO

Provider Gender: Male

License Number: LCS78433

NPI: 1962654327

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

GRAZIANO M MAURIZ

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: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU-F 8:30AM-5PM

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

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 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: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

WAGONER, KENYADA

Provider Gender: Female
License Number: LCS114731
NPI: 1760172688
Provider English Spoken: Y
Cultural Competency: N
KENYADA M WAGONER
 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: 11\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

IMPERIAL BEACH

WALSH, EMILY

Provider Gender: Female
License Number: MFC141158
NPI: 1134769490
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
EMILY A WALSH
 949 PALM AVE
IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
Fax: (877) 673-1361
 After Hours Phone: (619) 429-3733
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

LA JOLLA

BACANI, AMY

Provider Gender: Female
License Number: MFC39634
NPI: 1073586863
Provider English Spoken: Y
Cultural Competency: N
AMY D BACANI
 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

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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
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

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y

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

DHILLON, RACHEL

Provider Gender: Female

License Number: A178513

NPI: 1992281026

Provider English Spoken: Y

Cultural Competency: N

RACHEL E DHILLON

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (888) 539-8781

 After Hours 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.

١. دليل الصحة النفسية

 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): KRISTEN L DUARTE

N

 Accessibility: CONTACT PROVIDER

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): KAITLYN N EGAN

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364

Provider English Spoken: Y

Cultural Competency: N

 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): LINDSAY E ELLEDGE

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

ELLEDGE, LINDSAY

Provider Gender: Female

License Number: LCS96136

NPI: 1619428828

Provider English Spoken: Y

Cultural Competency: N

LINDSAY E ELLEDGE

 8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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.

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 Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM HENDRIE, KYLE Provider Gender: Male License Number: 20A21374 NPI: 1720549827 Provider English Spoken: Y Cultural Competency: N	KYLE A HENDRIE  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 HOLMBERG, CARRIE Provider Gender: Female License Number: A122061 NPI: 1164714143 Provider English Spoken: Y Cultural Competency: N CARRIE HOLMBERG  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 KHAFAJA, MOHAMAD Provider Gender: Male License Number: A115892 NPI: 1780867119 Provider English Spoken: Y Provider Language(s) Spoken: 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
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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.

١. دليل الصحة النفسية

 Hours: M-F 8AM-5PM

KOHLI, KANCHAN

Provider Gender: Female

License Number: C183282

NPI: 1235485343

Provider English Spoken: Y

Cultural Competency: N

KANCHAN K KOHLI

 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

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

 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

Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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:
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

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:
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

Provider Language(s) Spoken:
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

MITCHELL, NORA

Provider Gender: Female

License Number: LCS88855

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

NPI: 1245607043

Provider English Spoken: Y

Cultural Competency: N

NORA K MITCHELL

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

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)
826-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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, JULIA

Provider Gender: Female

License Number: A193351

NPI: 1881155232

Provider English Spoken: Y

Cultural Competency: N

JULIA K NGUYEN

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

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

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.

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

Provider Language(s) Spoken:
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

 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

Provider Language(s) Spoken:

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: N

WALI Z QAYOUMI

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

 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

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

SUTHERLAND, PAIGE

Provider Gender: Female

License Number: A178168

NPI: 1235767245

Provider English Spoken: Y

Cultural Competency: N

PAIGE A SUTHERLAND

 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

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 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
 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
 Hours: M-F 8AM-5PM

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

THOMAS, KELSEY

Provider Gender: Female
 License Number: PSY29738
 NPI: 1700264264
 Provider English Spoken: Y
 Cultural Competency: N
 KELSEY R THOMAS
 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

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

restriction

American Sign Language (ASL): Spanish

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

Provider Language(s) Spoken:

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

NATIONAL CITY

CHOI, MIN HU

Provider Gender: Female

License Number: MFC135952

NPI: 1871195107

Provider English Spoken: Y

Cultural Competency: N

MIN HU 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

CHOI, MIN HU

Provider Gender: Female

License Number: MFC135952

NPI: 1871195107

Provider English Spoken: Y

Cultural Competency: N

MIN HU 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-6PM

LAD, NIKISHA

Provider Gender: Female
 License Number: LCS120676
 NPI: 1942857107
 Provider English Spoken: Y
 Cultural Competency: N
 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 IV, ROBERT

Provider Gender: Male
 License Number: LCS117787
 NPI: 1689269631
 Provider English Spoken: Y
 Cultural Competency: N
 ROBERT M SIMMONS IV

 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

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

SIMMONS IV, ROBERT

Provider Gender: Male
License Number: LCS117787
NPI: 1689269631
Provider English Spoken: Y
Cultural Competency: N
ROBERT M SIMMONS IV
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

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 *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

*Provider Language(s) Spoken:
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*

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\18

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

MONTEZ, REBECCA

Provider Gender: Female

License Number: LCS26869

NPI: 1396047809

Provider English Spoken: Y

*Provider Language(s) Spoken:
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*

ORTIZ, BEVERLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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)
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

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): **PATEL, MITESH**

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): **RIVADENEYRA, KELLY**

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM
SA 9AM-4PM

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

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١. دليل الصحة النفسية

Provider Gender: Female
License Number: LCS122911
NPI: 1790242469
Provider English Spoken: Y
Cultural Competency: N
KELLY RIVADENEYRA
 605 CROUCH ST BLDG C
 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
 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 8AM-5PM

POWAY

MODHWADIA, MAMTA
Provider Gender: Female
License Number: A113990
NPI: 1043353667
Provider English Spoken: Y
Provider Language(s) Spoken:
 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

SAN DIEGO

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

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

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

restriction

American Sign Language (ASL): Provider English Spoken: Y
N

 Accessibility: CONTACT
PROVIDER

APPELBAUM, BRUCE

Provider Gender: Male

License Number: G69512

NPI: 1528046463

Provider English Spoken: Y

Cultural Competency: N

BRUCE D APPELBAUM

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (877) 673-1361

 After Hours Phone: (619)
429-3733

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

ARCEO, JACQUELINE

Provider Gender: Female

License Number: LCS110194

NPI: 1093350258

Provider English Spoken: Y
Cultural Competency: N

JACQUELINE C ARCEO

 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

ARCEO, JACQUELINE

Provider Gender: Female

License Number: LCS110194

NPI: 1093350258

Provider English Spoken: Y

Cultural Competency: N

JACQUELINE C ARCEO

 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

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

 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):

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

N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i> BANKS, SARAH <i>Provider Gender: Female</i> <i>License Number: PSY30296</i> <i>NPI: 1164701132</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> SARAH J BANKS  6655 ALVARADO RD SAN DIEGO, CA 92120  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</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> <i>TDD: U</i> <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> BANKS, SARAH <i>Provider Gender: Female</i> <i>License Number: PSY30296</i> <i>NPI: 1164701132</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> SARAH J BANKS	 200 W ARBOR DR FL 1 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> <i>TDD: U</i> <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> BAQIR, HUMA <i>Provider Gender: Female</i> <i>License Number: A188608</i> <i>NPI: 1306499132</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> HUMA BAQIR  6645 ALVARADO RD SAN DIEGO, CA 92120  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</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> <i>TDD: U</i> <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i>	<i>restriction</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> BAQIR, HUMA <i>Provider Gender: Female</i> <i>License Number: A188608</i> <i>NPI: 1306499132</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> HUMA BAQIR  6655 ALVARADO RD SAN DIEGO, CA 92120  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</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> <i>TDD: U</i> <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> BAQIR, HUMA <i>Provider Gender: Female</i> <i>License Number: A188608</i> <i>NPI: 1306499132</i> <i>Provider English Spoken: Y</i>
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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.

Cultural Competency: N

HUMA BAQIR

 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

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

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 8AM-4:30PM
TU 8AM-12PM
W 8AM-4:30PM
TH 8AM-12PM

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, DARCIE

Provider Gender: Female

License Number: MFC119851

NPI: 1639796071

Provider English Spoken: Y

Cultural Competency: N

DARCIE D BROWN

 16950 VIA TAZON
SAN DIEGO, CA 92127

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 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

CABALLERO, NOE

Provider Gender: Male
 License Number: A181276
 NPI: 1407483480
 Provider English Spoken: Y
 Cultural Competency: N
 NOE A CABALLERO
 6645 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): NOE A CABALLERO
 N

 Accessibility: CONTACT PROVIDER

CABALLERO, NOE

Provider Gender: Male
 License Number: A181276
 NPI: 1407483480
 Provider English Spoken: Y
 Cultural Competency: N
 NOE A CABALLERO
 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

CABALLERO, NOE

Provider Gender: Male
 License Number: A181276
 NPI: 1407483480
 Provider English Spoken: Y
 Cultural Competency: N

 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

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 Language(s) Spoken: Spanish

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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-5PM

CAZARES, DARIANA

Provider Gender: Female
License Number: LCS100887
NPI: 1609390665
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

DARIANA CAZARES

 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
 Site Languages(s) Spoken: Spanish

TDD: U
Min/Max Age: 7\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
 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 HU

Provider Gender: Female
License Number: MFC135952
NPI: 1871195107
Provider English Spoken: Y
Cultural Competency: N
MIN HU 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 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

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Min/Max Age: 0\None

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\None

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\None

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

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

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PROVIDER

CRISOL, CAROLINE

Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
CAROLINE M CRISOL
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

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 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

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

DIAZ, JAENAI

Provider Gender: Female
License Number: LCS80689
NPI: 1508241811
Provider English Spoken: Y
Provider Language(s) Spoken: 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

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Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

DIAZ, JAENAI

Provider Gender: Female

License Number: LCS80689

NPI: 1508241811

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

JAENAI DIAZ

 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

DOSS, KATIE

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979

Provider English Spoken: Y

Cultural Competency: N

KATIE L DOSS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

DOSS, KATIE

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

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restriction

American Sign Language (ASL): MELIZZA R ESPERANZA

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

ESPERANZA, MELIZZA

Provider Gender: Female

License Number: LCS100093

NPI: 1184763005

Provider English Spoken: Y

Cultural Competency: N

 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

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Provider Language(s) Spoken:

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

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Provider Language(s) Spoken:
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

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Gender Restriction: No Gender restriction

American Sign Language (ASL): MICHELLE E FIRESTONE
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

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

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١. دليل الصحة النفسية

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
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
Provider Language(s) Spoken:
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

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

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
Provider Language(s) Spoken:
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):
N
 Accessibility: CONTACT
PROVIDER

GULOTTA, SAMANTHA

Provider Gender: Female
License Number: MFC134199
NPI: 1790407732
Provider English Spoken: Y
Cultural Competency: N
SAMANTHA L GULOTTA

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

JOSHI, YASH

Provider Gender: Male
License Number: A147156

NPI: 1598151433

Provider English Spoken: Y
Cultural Competency: N
YASH B JOSHI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\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
Provider Language(s) Spoken:
Arabic
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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
Provider Language(s) Spoken: Arabic

Cultural Competency: N
MOHAMAD H KHAFAJA

 6645 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

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

KLIGIS, GABRIELLE

Provider Gender: Female
License Number: LCS125570
NPI: 1346802550

Provider English Spoken: Y
Cultural Competency: N

GABRIELLE L KLIGIS

 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 8AM-5PM

KLIGIS, GABRIELLE

Provider Gender: Female
License Number: LCS125570
NPI: 1346802550

Provider English Spoken: Y
Cultural Competency: N

GABRIELLE L KLIGIS

 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

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١. دليل الصحة النفسية

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

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

 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

KOHLI, KANCHAN

Provider Gender: Female

License Number: C183282

NPI: 1235485343

Provider English Spoken: Y

Cultural Competency: N

KANCHAN K KOHLI

 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

KRUCKENBERG, KATHERINE

Provider Gender: Female

License Number: A184317

NPI: 1518595826

Provider English Spoken: Y

Cultural Competency: N

KATHERINE M

KRUCKENBERG

 6645 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

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KRUCKENBERG, KATHERINE

Provider Gender: Female
License Number: A184317
NPI: 1518595826

Provider English Spoken: Y
Cultural Competency: N

KATHERINE M

KRUCKENBERG

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

KRUCKENBERG, KATHERINE

Provider Gender: Female
License Number: A184317
NPI: 1518595826

Provider English Spoken: Y
Cultural Competency: N

KATHERINE M

KRUCKENBERG

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

KRUCKENBERG, KATHERINE

Provider Gender: Female
License Number: A184317
NPI: 1518595826

Provider English Spoken: Y
Cultural Competency: N

KATHERINE M

KRUCKENBERG

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

LAIDLAW, JOHN

Provider Gender: Male

License Number: MFC44560

NPI: 1689790073

Provider English Spoken: Y

Cultural Competency: N

JOHN K LAIDLAW

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

LEDBETTER, ALEX

Provider Gender: Male

License Number: 20A20454

NPI: 1073017315

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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 restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

LEE, DAVID

Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: 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
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
XIA LI

 6645 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*

LI, XIA

Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y
Provider Language(s) Spoken: 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*

LIU, TIMOTHY

Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Provider Language(s) Spoken:

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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

Provider Language(s) Spoken:

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

MALAK, LAWRENCE

Provider Gender: Male

License Number: A115345

NPI: 1467773028

Provider English Spoken: Y

Cultural Competency: N

LAWRENCE T MALAK

6645 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

MALAK, LAWRENCE

Provider Gender: Male

License Number: A115345

NPI: 1467773028

Provider English Spoken: Y

Cultural Competency: N

LAWRENCE T MALAK

4290 POLK AVE

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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
 Provider Language(s) Spoken: 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

MARTINEZ, STEPHANIE

Provider Gender: Female
 License Number: A152787
 NPI: 1699126367
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

STEPHANIE MARTINEZ

 6645 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

MARTINEZ, STEPHANIE

Provider Gender: Female
 License Number: A152787
 NPI: 1699126367
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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
 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

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

MCCULLUM, TIFFANY

Provider Gender: Female

License Number: PSY29329

NPI: 1528306206

Provider English Spoken: Y

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

MEIER, EMILY

Provider Gender: Female

License Number: Psy25266

NPI: 1255530572

Provider English Spoken: Y

Cultural Competency: N

EMILY A MEIER

 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

MILLS, BRAD

Provider Gender: Male

License Number: LCS87409

NPI: 1598542813

Provider English Spoken: Y

Provider Language(s) Spoken:

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):
N

 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

 6645 ALVARADO RD
SAN DIEGO, CA 92120

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

 Phone: (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

MIRON, JEAN-PHILIPPE

Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y
Cultural Competency: N
JEAN-PHILIPPE MIRON

 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

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

 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

اتصل برعاية عملاء Blue Shield 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): NPI: 1558701623

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y

Provider Language(s) Spoken: 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

Provider English Spoken: Y

Provider Language(s) Spoken: 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

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

 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

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 **Accessibility:** CONTACT PROVIDER

NGUYEN, HOANG

Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Provider Language(s) Spoken: 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

NGUYEN, HOANG

Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Provider Language(s) Spoken: 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, JULIA

Provider Gender: Female
License Number: A193351
NPI: 1881155232
Provider English Spoken: Y
Cultural Competency: N
JULIA K NGUYEN

 6645 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

NGUYEN, JULIA

Provider Gender: Female
License Number: A193351
NPI: 1881155232
Provider English Spoken: Y
Cultural Competency: N
JULIA K NGUYEN

 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

NORMAN, MARC

Provider Gender: Male
License Number: PSY16278

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NPI: 1922169101

Provider English Spoken: Y

Cultural Competency: N

MARC A NORMAN

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

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):
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

Provider Language(s) Spoken:
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

PASTORES, GLEN

Provider Gender: Male

License Number: MFC94162

NPI: 1609980234

Provider English Spoken: Y

Cultural Competency: N

GLEN F PASTORES

350 DICKINSON ST
SAN DIEGO, CA 92103

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 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

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): Provider Language(s) Spoken:

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

Provider Language(s) Spoken:

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

 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

REINEKE, ANKE

Provider Gender: Female
License Number: PSY22669
NPI: 1205154747
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N

ANKE REINEKE

 3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 Phone: (858) 966-6974
Fax: (858) 966-6721
 After Hours Phone: (858) 966-6974
 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

REINEKE, ANKE

Provider Gender: Female

License Number: PSY22669
NPI: 1205154747
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
ANKE REINEKE

 8060 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 966-6974
Fax: (858) 966-6721
 After Hours Phone: (858) 966-6974
 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

RIBEIRO CALDAS

DOMINGUES, ISABEL

Provider Gender: Female
License Number: A132160
NPI: 1023367216
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
ISABEL A RIBEIRO CALDAS

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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
 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

RIVERA, KEVIN JOHN

Provider Gender: Male
License Number: A193862
NPI: 1760986715

Provider English Spoken: Y
Cultural Competency: N

KEVIN JOHN R RIVERA
 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

RIVERA, KEVIN JOHN

Provider Gender: Male
License Number: A193862
NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
Fax: (858) 633-4682

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 280-2058
 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 SA 8AM-2PM

RIVERA, KEVIN JOHN

Provider Gender: Male
 License Number: A193862
 NPI: 1760986715
 Provider English Spoken: Y
 Cultural Competency: N
 KEVIN JOHN R RIVERA
 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

RIVERA, KEVIN JOHN

Provider Gender: Male
 License Number: A193862
 NPI: 1760986715
 Provider English Spoken: Y
 Cultural Competency: N
 KEVIN JOHN R RIVERA
 6645 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

RIVERA, KEVIN JOHN

Provider Gender: Male
 License Number: A193862
 NPI: 1760986715
 Provider English Spoken: Y

Cultural Competency: N
 KEVIN JOHN R RIVERA
 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

 3665 KEARNY VILLA RD
STE 400

SAN DIEGO, CA 92123

 Phone: (858) 966-5990

Fax: (858) 966-7508

 After Hours Phone: (858)
966-5990

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): KRISTON B SCHELLINGER

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

 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

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

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

SCHNEEBERGER, ANDRES

Provider Gender: Male

License Number: C175502

NPI: 1184867376

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
ANDRES R SCHNEEBERGER

6645 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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (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

SUAREZ, ROBERTO

Provider Gender: Male

License Number: MFC25098

NPI: 1386785160

Provider English Spoken: Y

Provider Language(s) Spoken: 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: 6\21

Gender Restriction: No Gender restriction

American Sign Language (ASL): PAIGE A SUTHERLAND
N

 Accessibility: CONTACT PROVIDER

SUTHERLAND, PAIGE

Provider Gender: Female

License Number: A178168

NPI: 1235767245

Provider English Spoken: Y

Cultural Competency: N

PAIGE A SUTHERLAND

 6645 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

SUTHERLAND, PAIGE

Provider Gender: Female

License Number: A178168

NPI: 1235767245

Provider English Spoken: Y

Cultural Competency: N

 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): JESSICA L THACKABERRY 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
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

THACKABERRY, JESSICA

Provider Gender: Female

License Number: A128967

NPI: 1134478910

Provider English Spoken: Y

Cultural Competency: N

JESSICA L THACKABERRY

 6645 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

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

 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204

NPI: 1255696183

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: N

TUAN TO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\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.

PROVIDER

TO, TUAN

Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken: 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
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
Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

WALSH, EMILY

Provider Gender: Female
License Number: MFC141158
NPI: 1134769490

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
EMILY A WALSH

 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (877) 673-1361
 After Hours Phone: (619)
429-3733
 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

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
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\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.

N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM	Provider Language(s) Spoken: Spanish Cultural Competency: N DIANA L YIDI	 Phone: (619) 662-4100  Fax: (619) 785-3384  After Hours Phone: (619) 662-4100  Website: N/A
YAGUDAYEVA, RAISA Provider Gender: Female License Number: 20A14848 NPI: 1942555990 Provider English Spoken: Y Provider Language(s) Spoken: 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	 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	Accepting New Patients: Yes Site English Spoken: Y  Site Languages(s) Spoken: Spanish TDD: U Min/Max Age: 6\21 Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M 9AM-7PM W-F 9AM-6PM
YIDI, DIANA Provider Gender: Female License Number: LCS110300 NPI: 1194438663 Provider English Spoken: Y	ZAYAS, MARIO Provider Gender: Male License Number: MFC111273 NPI: 1275943557 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N MARIO E ZAYAS  1666 PRECISION PARK LN SAN DIEGO, CA 92173	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:

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

Spanish
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
150 VALPRED 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

Hours: M-F 8AM-5PM

SAN MARCOS

ARIELLA, LYNDIA

Provider Gender: Female
License Number: PSY19450
NPI: 1073518965
Provider English Spoken: Y
Cultural Competency: N
LYNDIA R ARIELLA

150 VALPRED 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: 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
Provider Language(s) Spoken:

Portuguese, Spanish
Cultural Competency: N
CLAUDIO O CABREJOS
150 VALPRED 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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين 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

Site English Spoken: Y

TDD: U

Min/Max Age: 0\18

Gender Restriction: No Gender restriction

American Sign Language (ASL): Hindi, Urdu

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 VALPREDA 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

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency: N

SYED IMAM

 150 VALPREDA 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 restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

MELENDEZ, DAVIS

Provider Gender: Male

License Number: LCS111804

NPI: 1750724100

Provider English Spoken: Y

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency: N

DAVIS R MELENDEZ

 150 VALPREDA 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: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

MERGENTHALER, SIGRID

Provider Gender: Female

License Number: LCS123604

NPI: 1477759017

Provider English Spoken: Y

Provider Language(s) Spoken:

German

Cultural Competency: N

SIGRID F MERGENTHALER

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 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
 Site Language(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 8AM-5PM

ROJAS, LEONOR

Provider Gender: Female
 License Number: LCS124195
 NPI: 1346728862
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 LEONOR ROJAS
 150 VALPRED 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 8AM-5PM
 W-F 8AM-5PM

TORRES, HECTOR

Provider Gender: Male
 License Number: PSY13309
 NPI: 1720265614
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 HECTOR M TORRES
 150 VALPRED 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
WEBER, SARA
 Provider Gender: Female

License Number: MFC121580
 NPI: 1891856381
 Provider English Spoken: Y
 Cultural Competency: N
 SARA J WEBER
 150 VALPRED 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
 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

SAN YSIDRO

BALTRUS, JUSTINE ANN

Provider Gender: Female
 License Number: MFC132018
 NPI: 1285040709
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 JUSTINE ANN M BALTRUS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

CRAWFORD-DAY, ANN

Provider Gender: Female

License Number: A166646

NPI: 1386149706

Provider English Spoken: Y

Provider Language(s) Spoken:
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

Provider Language(s) Spoken:
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

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

IBANEZ, BERENICE

Provider Gender: Female

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١. دليل الصحة النفسية

License Number: PSY22080
NPI: 1740394386
Provider English Spoken: Y
Provider Language(s) Spoken:
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

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
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
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
Provider Language(s) Spoken:
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

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 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

TAPIA, ASHLEY

Provider Gender: Female
License Number: LCS118965
NPI: 1952821472
Provider English Spoken: Y
Cultural Competency: N

ASHLEY TAPIA

 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: 12\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

ZAYAS, MARIO

Provider Gender: Male
License Number: MFC111273
NPI: 1275943557
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MARIO E ZAYAS

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 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: 6\21
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU 9AM-7PM
W-F 9AM-6PM

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
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.

 Hours: M-F 8AM-5PM

VALLEY CENTER

PLASCENCIA, CINDY

Provider Gender: Female

License Number: MFC113536

NPI: 1952723736

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

CINDY PLASCENCIA

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760) 742-9919

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

VISTA

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

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

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.

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

Provider Language(s) Spoken:

Spanish, Vietnamese

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

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken:

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):

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):

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

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): 1U

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):
N

Accessibility: CONTACT PROVIDER

Public transportation (within

Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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

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

HUANG, GRACE, OD

Provider Gender: Female

License Number: 35485

NPI: 1013605526

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

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: 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

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

MARYOUNG, ALLISON, OD

Provider Gender: Female

License Number: 35512

NPI: 1083309124

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

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

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

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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
Provider Language(s) Spoken: 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

TAVASSOLI, SARA, OD

Provider Gender: Female
License Number: 13395
NPI: 1184764011
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

TO, BRITTANY, OD

Provider Gender: Female

License Number: 10651

NPI: 1306997143

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

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

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

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

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYECARE OF BONITA

4502 BONITA RD
BONITA, CA 91902

Phone: (619) 479-7334

Fax: (619) 475-3456

After Hours Phone: (619)
479-7334

Accepting New Patients: Yes

Site English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Min/Max 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 8AM-1PM F 8AM-6PM SA 9AM-2PM	Min/Max 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	N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T  Hours: M-W 8:30AM-5PM TH 10:30AM-7PM F 8:30AM-5PM
CARLSBAD HO, TRAM, OD Provider Gender: Female License Number: 13485 NPI: 1245464460 Provider English Spoken: Y Provider Language(s) Spoken: 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	RAMOLIA, ANIKA, OD Provider Gender: Female License Number: 13802 NPI: 1205084787 Provider English Spoken: Y Provider Language(s) Spoken: Hindi, Spanish Cultural Competency: Y BEACON OPTOMETRY  7720 EL CAMINO REAL STE G CARLSBAD, CA 92009  Phone: (760) 278-8068 Fax: (760) 278-3539  After Hours Phone: (760) 278-8068 Accepting New Patients: Yes  Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N	THAN, CINDY, OD Provider Gender: Female License Number: 13602 NPI: 1316103633 Provider English Spoken: Y Provider Language(s) Spoken: Vietnamese Cultural Competency: Y PIER VISION OPTOMETRY  2525 EL CAMINO REAL STE 125 CARLSBAD, CA 92008  Phone: (760) 912-5552 Fax: (619) 996-0700  After Hours Phone: (760) 912-5552 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: TU-F 11AM-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

SA 11AM-6PM

CHULA VISTA

CASTILLEJOS, DAVID, MD

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

Provider Language(s) Spoken:

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

Provider Language(s) Spoken: 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

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

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

CHISHOLM, KAREN, OD

License Number: 35450

NPI: 1568155190

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

1741 EASTLAKE PKWY 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.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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: 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

HUANG, PETER, OD

Provider Gender: Male
License Number: 11659
NPI: 1639100522
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
PETER D HUANG OD INC
📍 557 H ST
CHULA VISTA, CA 91910
☎ Phone: (619) 422-0139
Fax: (619) 422-0066
🕒 After Hours Phone: (619)

422-0139
Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max 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 8AM-4PM
SA 9AM-2PM

KALRA, ANKUR, OD

Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken: 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: 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
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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	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	 Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: SU 10AM-4PM M-F 9AM-7PM SA 9AM-5PM
KIM, JENNY, OD Provider Gender: Female License Number: 35831 NPI: 1497588362 Provider English Spoken: Y Provider Language(s) Spoken: Korean 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: Hindi, Spanish Min/Max Age: 0\None	KING, MARY, OD Provider Gender: Female License Number: 13711 NPI: 1578792107 Provider English Spoken: Y Provider Language(s) Spoken: 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: Hindi, Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL):	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 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

F 9AM-5PM

NGUYEN, TRACY, OD

Provider Gender: Female

License Number: 10859

NPI: 1265596621

Provider English Spoken: Y

Provider Language(s) Spoken:
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

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:
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

OSSAREH, DIBA, OD

Provider Gender: Female

License Number: 35830

NPI: 1235816067

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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	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	Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M 8AM-5PM TU 7AM-5PM W-F 8AM-5PM
PLUCINIK, STANLEY, OD Provider Gender: Male License Number: 35255 NPI: 1124751417 Provider English Spoken: Y Provider Language(s) Spoken: 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	SCOVILL, ALEXANDRA, OD Provider Gender: Female License Number: 33711 NPI: 1184146094 Provider English Spoken: Y Provider Language(s) Spoken: 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	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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

M-F 9AM-7PM
SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Provider Language(s) Spoken: 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
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: 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

TRINH, RACHELLE, OD

Provider Gender: Female
License Number: 35531
NPI: 1467139287
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
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: 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
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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
Provider Language(s) Spoken: Russian

Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max 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

EL CAJON

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): **BINDER, NICHOLAS, MD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken: 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

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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

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

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

 Hours: M-F 8:30AM-6PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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
HUANG, GRACE, OD
 Provider Gender: Female
 License Number: 35485
 NPI: 1013605526
 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
 Provider Language(s) Spoken: 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

KHALIL, VADY, OD
 Provider Gender: Male
 License Number: 35137
 NPI: 1275263584
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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	Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8:30AM-6PM MARYOUNG, ALLISON, OD Provider Gender: Female License Number: 35512 NPI: 1083309124 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	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 1/2 mile from Site): 1T Hours: M 9AM-5PM TU 10AM-5PM W-TH 9AM-5PM F 8AM-2PM
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	MCMURREN, BRITTANY, OD Provider Gender: Female License Number: 14824 NPI: 1104243815 Provider English Spoken: Y	PANDYA, BHUMIKA, OD Provider Gender: Female License Number: 35025 NPI: 1063182822 Provider English Spoken: Y Provider Language(s) Spoken: Hindi Cultural Competency: Y RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP 300 S PIERCE ST STE 200

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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): **SCOTT, JEFFREY, OD**
 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
 Provider Language(s) Spoken: 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

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 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6PM

TAVASSOLI, SARA, OD

Provider Gender: Female
 License Number: 13395
 NPI: 1184764011
 Provider English Spoken: Y
 Cultural Competency: Y
 RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

TO, BRITTANY, OD

Provider Gender: Female
 License Number: 10651
 NPI: 1306997143
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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

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
 Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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	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	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
WERNER, R AARON, OD Provider Gender: Male License Number: 13478 NPI: 1821259458 Provider English Spoken: Y Provider Language(s) Spoken: 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	WERNER, REX, OD Provider Gender: Male License Number: 9378 NPI: 1891760716 Provider English Spoken: Y Provider Language(s) Spoken: Italian, Spanish Cultural Competency: Y WERNER OPTOMETRY 2650 JAMACHA RD STE 155 EL CAJON, CA 92019 Phone: (619) 670-6296 Fax: (619) 670-8852 After Hours Phone: (619) 670-6296 Accepting New Patients: Yes Site English Spoken: Y Site Languages(s) Spoken: Italian, Spanish Min/Max Age: 0\None Gender Restriction: No Gender	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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

American Sign Language (ASL):
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

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

BANDAK, DIANA, OD

Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken:
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):
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
Provider Language(s) Spoken:
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

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): Provider Gender: Female
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

 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): Provider Gender: Female
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): Provider Gender: Female
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken: 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):

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

Provider Language(s) Spoken: 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):

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

 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

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL ENCINITAS

 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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) 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

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 Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): **MORRISON REYES, JOSHUA, MD**

 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

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken: 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 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

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

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

Provider Language(s) Spoken:
German, 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

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

TAVASSOLI, SARA, OD

Provider Gender: Female

License Number: 13395

NPI: 1184764011

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

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):
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

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):
N

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

Provider Language(s) Spoken:
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

Provider Language(s) Spoken:
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

8:30AM-4:30PM

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

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 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 ☐ 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	American Sign Language (ASL): DUONG, KIM, OD Provider Gender: Female License Number: 34222 NPI: 1114448651 Provider English Spoken: Y Provider Language(s) Spoken: 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
CHAU, VIVIAN, OD Provider Gender: Female License Number: 35427 NPI: 1558052951 Provider English Spoken: Y Provider Language(s) Spoken: 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	CHONG, TAMMY, OD Provider Gender: Female License Number: 35841 NPI: 1700612975 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
GOLDSTONE, ADAM, OD Provider Gender: Male License Number: 11051 NPI: 1316972995 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

 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

HUANG, GRACE, OD

Provider Gender: Female

License Number: 35485

NPI: 1013605526

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

 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

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: 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

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

Provider Language(s) Spoken: Arabic

Cultural Competency: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): **KLAREN, AMANDA, OD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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): **LE, TAM, OD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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

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

 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

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

MARYOUNG, ALLISON, OD

Provider Gender: Female
 License Number: 35512
 NPI: 1083309124
 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

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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Language(s) Spoken: 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 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

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

Provider Language(s) Spoken: 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

Provider Language(s) Spoken: Gujarati

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 8:30AM-4:30PM**

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**

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: 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**

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:

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**

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

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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

TAVASSOLI, SARA, OD

Provider Gender: Female
License Number: 13395
NPI: 1184764011
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
Provider Language(s) Spoken: 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

TO, BRITTANY, OD

Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
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

TON-NU, MY LINH, OD

Provider Gender: Female

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
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
Provider Language(s) Spoken: French, Spanish
Cultural Competency: Y
ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 747-7979
Fax: (760) 747-7799
After Hours Phone: (760) 747-7979
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Arabic, French, Spanish
Min/Max 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
F 9AM-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

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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 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
 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

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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-F 8AM-5PM

CONNOR, JEFFREY, OD

Provider Gender: Male

License Number: 33683

NPI: 1063968980

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102 FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760) 728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max 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): 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

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Provider Language(s) Spoken: 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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
W 9AM-6PM
F 1PM-5PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551

Provider English Spoken: Y

Provider Language(s) Spoken: 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
W 9AM-6PM
F 1PM-5PM

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

NOORI, SARA, OD

Provider Gender: Female

License Number: 35457

NPI: 1477248912

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

Provider Language(s) Spoken:

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Provider Language(s) Spoken:
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

HANONO, ABRAHAM, OD

Provider Gender: Male

License Number: 14900

NPI: 1356754741

Provider English Spoken: Y

Provider Language(s) Spoken:

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

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

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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-F 8AM-4:30PM

CHONG, TAMMY, OD

Provider Gender: Female
 License Number: 35841
 NPI: 1700612975
 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
 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

DEAN, MOENA, OD

Provider Gender: Female
 License Number: 33955
 NPI: 1265927578
 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

DYER, SHARON, OD

Provider Gender: Female
 License Number: 33450
 NPI: 1063866887
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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	N Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8AM-4:30PM HO, AMIEE, OD Provider Gender: Female License Number: 14527 NPI: 1396009478 Provider English Spoken: Y Cultural Competency: Y UCSD SHILEY EYE CENTER 9415 CAMPUS POINT DR LA JOLLA, CA 92093 Phone: (858) 534-6290 Fax: (858) 732-0921 After Hours Phone: (858) 534-6290 Accepting New Patients: Yes Site English Spoken: Y Min/Max 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	NPI: 1275566010 Provider English Spoken: Y Provider Language(s) Spoken: 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 Provider Language(s) Spoken: Spanish Cultural Competency: Y PERLMAN OPHTHALMOLOGY-UCSD
HO, AMIEE, OD Provider Gender: Female License Number: 14527 NPI: 1396009478 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): 1U Hours: M-F 8AM-4:30PM SA 8AM-2PM HOO, PAMELA, OD Provider Gender: Female License Number: 11033	HO, AMIEE, OD Provider Gender: Female License Number: 14527 NPI: 1396009478 Provider English Spoken: Y Cultural Competency: Y UCSD SHILEY EYE CENTER 9415 CAMPUS POINT DR LA JOLLA, CA 92093 Phone: (858) 534-6290 Fax: (858) 732-0921 After Hours Phone: (858) 534-6290 Accepting New Patients: Yes Site English Spoken: Y Min/Max 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	HOO, PAMELA, OD Provider Gender: Female License Number: 11033 NPI: 1275566010 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: Y PERLMAN OPHTHALMOLOGY-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.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

HUANG, GRACE, OD

Provider Gender: Female

License Number: 35485

NPI: 1013605526

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

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

Provider Language(s) Spoken:
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

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

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

Provider Language(s) Spoken:

French

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

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

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

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max 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

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic

Cultural Competency: Y

ACUITY EYE GROUP

 9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Min/Max 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): N

 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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): 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

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

MARYOUNG, ALLISON, OD

Provider Gender: Female

License Number: 35512

NPI: 1083309124

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 Language(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

Provider Language(s) Spoken: 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-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

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

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	1/2 mile from Site): 1U	NPI: 1184764011
American Sign Language (ASL):  Hours: M-F 8AM-4:30PM		Provider English Spoken: Y
N		Cultural Competency: Y
 Accessibility: CONTACT PROVIDER	PRATT, STEVEN, MD	ACUITY EYE GROUP
Public transportation (within 1/2 mile from Site): 1U	Provider Gender: Male	 9850 GENESEE AVE STE 310
 Hours: M-F 8AM-4:30PM	License Number: G32379	LA JOLLA, CA 92037
	NPI: 1407963044	 Phone: (858) 457-3010
	Provider English Spoken: Y	Fax: (858) 457-0028
	Provider Language(s) Spoken: Spanish	 After Hours Phone: (858) 457-3010
PERRY, ARTHUR, MD	Cultural Competency: Y	Accepting New Patients: Yes
Provider Gender: Male	ACUITY EYE GROUP	 Site English Spoken: Y
License Number: C37934	 9850 GENESEE AVE STE 310	 Site Languages(s) Spoken: Spanish, Tagalog
NPI: 1194832725	LA JOLLA, CA 92037	Min/Max Age: 0\None
Provider English Spoken: Y	 Phone: (858) 457-3010	Gender Restriction: No Gender restriction
Provider Language(s) Spoken: Spanish	Fax: (858) 457-0028	American Sign Language (ASL): N
Cultural Competency: Y	 After Hours Phone: (858) 457-3010	 Accessibility: CONTACT PROVIDER
ACUITY EYE GROUP	Accepting New Patients: Yes	Public transportation (within 1/2 mile from Site): 1U
 9850 GENESEE AVE STE 310	 Site English Spoken: Y	 Hours: M-F 8AM-4:30PM
LA JOLLA, CA 92037	 Site Languages(s) Spoken: Spanish, Tagalog	
 Phone: (858) 457-3010	Min/Max Age: 0\None	
Fax: (858) 457-0028	Gender Restriction: No Gender restriction	
 After Hours Phone: (858) 457-3010	American Sign Language (ASL): N	
Accepting New Patients: Yes	 Accessibility: CONTACT PROVIDER	TO, BRITTANY, OD
 Site English Spoken: Y	Public transportation (within 1/2 mile from Site): 1U	Provider Gender: Female
 Site Languages(s) Spoken: Spanish, Tagalog	 Hours: M-F 8AM-4:30PM	License Number: 10651
Min/Max Age: 0\None		NPI: 1306997143
Gender Restriction: No Gender restriction		Provider English Spoken: Y
American Sign Language (ASL): N		Provider Language(s) Spoken: Vietnamese
 Accessibility: CONTACT PROVIDER	TAVASSOLI, SARA, OD	Cultural Competency: Y
Public transportation (within 1/2 mile from Site): 1U	Provider Gender: Female	ACUITY EYE GROUP
	License Number: 13395	 9850 GENESEE AVE STE 310

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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 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
 Provider Language(s) Spoken: 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

VO, ANDREW MINH, OD

Provider Gender: Male
 License Number: 33869

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken:
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

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
Min/Max 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

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s) Spoken:
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

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
SA 8AM-2PM

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
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

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
Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
 Site Languages(s) Spoken: Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): **AVALLONE, THOMAS, MD**
 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
 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

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
 Provider Language(s) Spoken: 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

BANDAK, DIANA, OD

Provider Gender: Female
 License Number: 34850
 NPI: 1235805318
 Provider English Spoken: Y
 Provider 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

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

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken:

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

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

BUI, TINA, OD
Provider Gender: Female
License Number: 33435
NPI: 1497107312
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y
BUIQUE 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

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

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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
Min/Max 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

CHONG, TAMMY, OD

Provider Gender: Female
License Number: 35841
NPI: 1700612975
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
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
Provider Language(s) Spoken: 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
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
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

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

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 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): N

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1477879823

Provider English Spoken: Y

Provider Language(s) Spoken:

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 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

Provider Language(s) Spoken:

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

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

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

Provider Language(s) Spoken: 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 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): F 9AM-5PM

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 CENTER

OPTOMETRY

 8007 LA MESA BLVD
LA MESA, CA 91942

 Phone: (619) 466-5665

Fax: (619) 466-5688

 After Hours Phone: (619) 466-5665

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max 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-4PM
W-TH 9AM-6PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

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 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

HUANG, GRACE, OD

Provider Gender: Female

License Number: 35485

NPI: 1013605526

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

HUANG, GRACE, OD

Provider Gender: Female

License Number: 35485

NPI: 1013605526

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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	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 Provider English Spoken: Y Provider Language(s) Spoken: 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
HUDSON, HENRY, MD Provider Gender: Male License Number: G76091 NPI: 1851349195 Provider English Spoken: Y Cultural Competency: Y EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP  5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942  Phone: (619) 465-2020 Fax: (619) 698-1189  After Hours Phone: (619) 465-2020 Accepting New Patients: Yes  Site English Spoken: Y  Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender	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	KALBAKJI, NATALY, OD Provider Gender: Female License Number: 34943 NPI: 1700556438 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

Provider Language(s) Spoken: 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

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

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken: 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

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

Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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**

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: 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**

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
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: (619) 583-4295

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: 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

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

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

MARYOUNG, ALLISON, OD

Provider Gender: Female

License Number: 35512

NPI: 1083309124

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

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

MARYOUNG, ALLISON, OD

Provider Gender: Female
License Number: 35512
NPI: 1083309124
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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

MERALI, MURTAZA, OD

Provider Gender: Female

License Number: 14558

NPI: 1972944189

Provider English Spoken: Y

Provider Language(s) Spoken:
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

MORGAN, HUNTER, OD

Provider Gender: Male

License Number: 34799

NPI: 1023547221

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

LA MESA VISION CENTER
OPTOMETRY

8007 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 466-5665

Fax: (619) 466-5688

After Hours Phone: (619)
466-5665

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max 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-4PM
W-TH 9AM-6PM
F 9AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:
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

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:
Indonesian, Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
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) 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

NGUYEN, THY, OD

Provider Gender: Female

License Number: 12746

NPI: 1750490413

Provider English Spoken: Y

Provider Language(s) Spoken: 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 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

Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
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

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:
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

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 Public transportation (within 1/2 mile from Site): 1T

American Sign Language (ASL):  Hours: M-F 8AM-5PM N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

QUACH, PHUC, OD

Provider Gender: Male

License Number: 12891

NPI: 1770617805

Provider English Spoken: Y

Provider Language(s) Spoken: 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): 1/2 mile from Site): 1T

N

 Accessibility: CONTACT PROVIDER

RAJADHYKSHA, SALOMI, OD

Provider Gender: Female

License Number: 34821

NPI: 1134641434

Provider English Spoken: Y

Provider Language(s) Spoken:

Hindi, Marathi, Spanish, Yiddish

Cultural Competency: Y

LA MESA VISION CENTER OPTOMETRY

 8007 LA MESA BLVD LA MESA, CA 91942

 Phone: (619) 466-5665

Fax: (619) 466-5688

 After Hours Phone: (619) 466-5665

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max 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-4PM W-TH 9AM-6PM F 9AM-5PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

TAVASSOLI, SARA, OD

Provider Gender: Female

License Number: 13395

NPI: 1184764011

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

TAVASSOLI, SARA, OD

Provider Gender: Female

License Number: 13395

NPI: 1184764011

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

TO, BRITTANY, OD

Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken:
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

TO, BRITTANY, OD

Provider Gender: Female

License Number: 10651

NPI: 1306997143

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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):  Hours: M-F 8AM-5PM
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

Provider Language(s) Spoken: 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

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 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

Provider Language(s) Spoken: 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

TURRILL, MCKENNA, OD

Provider Gender: Female

License Number: 35777

NPI: 1194419960

Provider English Spoken: Y

Cultural Competency: Y

LA MESA VISION CENTER OPTOMETRY

 8007 LA MESA BLVD
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) 466-5665
 Fax: (619) 466-5688
 After Hours Phone: (619) 466-5665
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 Min/Max 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-4PM
 W-TH 9AM-6PM
 F 9AM-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

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

YOUNG, ALLA, OD

Provider Gender: Female
 License Number: 34191
 NPI: 1285085142
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 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

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

NATIONAL CITY

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

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 PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken:

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

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken:

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

Min/Max 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

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

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

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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 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

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

Provider Language(s) Spoken:

German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken: Spanish

Min/Max 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

HUANG, GRACE, 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: 35485
NPI: 1013605526
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

HUANG, GRACE, OD

Provider Gender: Female
License Number: 35485
NPI: 1013605526
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

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

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: 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**

KALRA, ANKUR, OD
Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken: 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
Provider Language(s) Spoken: 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**

KEDDINGTON, JOAN, OD
Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

Provider Language(s) Spoken:
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

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
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

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

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

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
F 8AM-5PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y

Provider Language(s) Spoken:
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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	1/2 mile from Site): 1T	Provider English Spoken: Y
American Sign Language (ASL):  Hours: M-TU 8AM-6PM	W 8:30AM-5PM	Cultural Competency: Y
N	TH 8AM-6PM	ACUITY EYE GROUP
 Accessibility: CONTACT	F 8AM-5PM	 655 EUCLID AVE STE 302
PROVIDER		NATIONAL CITY, CA 91950
Public transportation (within	MARYOUNG, ALLISON, OD	 Phone: (619) 472-1010
1/2 mile from Site): 1U	Provider Gender: Female	Fax: (619) 479-5233
 Hours: M 10AM-6PM	License Number: 35512	 After Hours Phone: (619)
W 10AM-6PM	NPI: 1083309124	472-1010
F 10AM-6PM	Provider English Spoken: Y	Accepting New Patients: Yes
SA 10AM-2PM	Cultural Competency: Y	 Site English Spoken: Y
	WEST COAST EYE CARE	 Site Languages(s) Spoken:
	 2240 E PLAZA BLVD STE	Spanish
	FG	Min/Max Age: 0\None
	NATIONAL CITY, CA 91950	Gender Restriction: No Gender
	 Phone: (619) 470-2700	restriction
	Fax: (619) 267-8221	American Sign Language (ASL):
	 After Hours Phone: (619)	N
	470-2700	 Accessibility: CONTACT
	Accepting New Patients: Yes	PROVIDER
	 Site English Spoken: Y	Public transportation (within
	Min/Max Age: 0\None	1/2 mile from Site): 1T
	Gender Restriction: No Gender	 Hours: M-TU 8AM-6PM
	restriction	W 8:30AM-5PM
	American Sign Language (ASL):	TH 8AM-6PM
	N	F 8AM-5PM
	 Accessibility: CONTACT	MCGRAW, JOSEPH, MD
	PROVIDER	Provider Gender: Male
	Public transportation (within	License Number: A155228
	1/2 mile from Site): 1U	NPI: 1588624852
	 Hours: M-F 8AM-4:30PM	Provider English Spoken: Y
	MCGRAW, JOSEPH, MD	Cultural Competency: Y
	Provider Gender: Male	WEST COAST EYE CARE
	License Number: A155228	 2240 E PLAZA BLVD STE
	NPI: 1588624852	FG
		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) 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

MENDOZA, RAYMUNDO, OD

Provider Gender: Male

License Number: 8150

NPI: 1306837760

Provider English Spoken: Y

Provider Language(s) Spoken: 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

Provider Language(s) Spoken:

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

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

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

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, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

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
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, 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

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): 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

TAVASSOLI, SARA, OD

Provider Gender: Female
License Number: 13395
NPI: 1184764011

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

TAVASSOLI, SARA, OD

Provider Gender: Female
License Number: 13395
NPI: 1184764011
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

TO, BRITTANY, OD

Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield 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):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

TO, BRITTANY, OD

Provider Gender: Female

License Number: 10651

NPI: 1306997143

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

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

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

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

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA 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.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

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

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

WU, EVA, OD

Provider Gender: Female

License Number: 14743

NPI: 1073954442

Provider English Spoken: Y

Provider Language(s) Spoken:

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

NGUYEN, BERLINDA, OD

Provider Gender: Female
License Number: 35862
NPI: 1417776238
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
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

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
Provider Language(s) Spoken: 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

SAN DIEGO

ACKROYD, ARCHIE, OD

Provider Gender: Male
License Number: 4774
NPI: 1629107172
Provider English Spoken: Y
Cultural Competency: Y
VAN HOOSE OPTOMETRIC CORPORATION

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

 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

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

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

Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

BANDAK, DIANA, OD

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

Provider Language(s) Spoken:

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

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s) Spoken:

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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 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

📍 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

BOECK, CARL, OD

Provider Gender: Male

License Number: 6620

NPI: 1588656151

Provider English Spoken: Y

Provider Language(s) Spoken:
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 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 ☐ 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	PROVIDER Public transportation (within 1/2 mile from Site): 1T 🕒 Hours: M-F 9:30AM-6PM SA 9AM-3PM	F 9AM-5PM SA 9AM-1PM CHEN, LESLIE, OD Provider Gender: Female License Number: 12792 NPI: 1508953332 Provider English Spoken: Y Provider Language(s) Spoken: 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
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 Gender Restriction: No Gender restriction American Sign Language (ASL): N ☐ Accessibility: CONTACT	CHAIN, PEI CHI, OD Provider Gender: Female License Number: 34439 NPI: 1730676727 Provider English Spoken: Y Provider Language(s) Spoken: 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): N ☐ Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T 🕒 Hours: M-TU 9AM-5PM W 10AM-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

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

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

CHUNG, ALLEN, OD

Provider Gender: Male

License Number: 33974

NPI: 1003301391

Provider English Spoken: Y

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): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 9AM-5PM
W 10AM-6PM
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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-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

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

DUONG, KIM, OD

Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Provider Language(s) Spoken:
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): 1U

 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

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

 Hours: TH-F 9AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): 1T

 Hours: M-F 8AM-5PM

HOANG, KEVIN, OD

Provider Gender: Male

License Number: 34401

NPI: 1790339216

Provider English Spoken: Y

Provider Language(s) Spoken: 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

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 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

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

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ 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

HUANG, GRACE, OD

Provider Gender: Female

License Number: 35485

NPI: 1013605526

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

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

Provider Language(s) Spoken: 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, PAUL, MD

Provider Gender: Male

License Number: A79141

NPI: 1871577056

Provider English Spoken: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Provider Language(s) Spoken:
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):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

HUYNH, CHI, OD

Provider Gender: Female

License Number: 12901

NPI: 1922187426

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

CRYSTAL EYESITE

OPTOMETRY

9225 MIRA MESA BLVD STE

108

SAN DIEGO, CA 92126

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

Provider Language(s) Spoken:
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

Site Languages(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, LOAN, OD

Provider Gender: Female

License Number: 34472

NPI: 1003454604

Provider English Spoken: Y

Provider Language(s) Spoken:
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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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

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

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
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

Provider Language(s) Spoken: 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

KATZMAN, BARRY, MD

Provider Gender: Male
License Number: A34834
NPI: 1760473797

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: Y
WEST COAST EYE CARE

6945 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.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

KHALIGHI, PAYMAN, OD
 Provider Gender: Male
 License Number: 13014
 NPI: 1396897880
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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 N
 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

KHALIL, VADY, OD
 Provider Gender: Male
 License Number: 35137
 NPI: 1275263584
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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

KHAN, FAHAD, MD
 Provider Gender: Male
 License Number: A163142
 NPI: 1548605843
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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
 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-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
📍 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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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): Provider Gender: Female

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

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (619) 543-6244

Fax: (619) 295-5034

 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max 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

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

 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 9:30AM-6PM
SA 9AM-3PM

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

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken:
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

Provider Language(s) Spoken:
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

 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

Provider 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, 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
Provider Language(s) Spoken:
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
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

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
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
 Site Languages(s) Spoken:
 Korean, Spanish,
 Vietnamese
 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-4PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

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

MARYOUNG, ALLISON, OD

Provider Gender: Female

License Number: 35512

NPI: 1083309124

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

MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y

Provider Language(s) Spoken:

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

Provider Language(s) Spoken:

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

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

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
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
 License Number: A125435
 NPI: 1235366782
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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
 W 8:30AM-5PM
 TH 8AM-6PM
 F 8AM-4PM

NGUYEN, JASMINE, OD

Provider Gender: Female
 License Number: 11189
 NPI: 1497896922
 Provider English Spoken: Y
 Provider Language(s) Spoken: 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
 Provider Language(s) Spoken: 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, VIET, OD

Provider Gender: Male
 License Number: 35481

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1861170573

Provider English Spoken: Y

Provider Language(s) Spoken:
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, KELVIN, OD

Provider Gender: Male

License Number: 11085

NPI: 1518923572

Provider English Spoken: Y

Provider Language(s) Spoken:
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

Site Languages(s) Spoken:
Korean, 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
8:30AM-5:30PM

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Provider Language(s) Spoken:
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

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Korean, 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
8:30AM-5:30PM

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Provider Language(s) Spoken:
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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, 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	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	Public transportation (within 1/2 mile from Site): 1U  Hours: M-F 7AM-5PM
NGUYEN, THANH, OD Provider Gender: Female License Number: 13126 NPI: 1992813323 Provider English Spoken: Y Provider Language(s) Spoken: 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	O HALLORAN, HENRY, MD Provider Gender: Male License Number: A73282 NPI: 1235287947 Provider English Spoken: Y Provider Language(s) Spoken: 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	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, SARJAN, MD Provider Gender: Male License Number: A114976

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max 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

PHAM, TONY, OD

Provider Gender: Male

License Number: 12348

NPI: 1841271434

Provider English Spoken: Y

Provider Language(s) Spoken:

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

Provider Language(s) Spoken:

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 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
 Provider Language(s) Spoken: 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
 W 8:30AM-5PM
 TH 8AM-6PM
 F 8AM-4PM

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

SANDOC, EMILY, OD

Provider Gender: Female
 License Number: 13535
 NPI: 1992969794
 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

SHULKIN, MITCHELL, OD

Provider Gender: Male
 License Number: 8153
 NPI: 1770531865
 Provider English Spoken: Y
 Cultural Competency: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
NPI: 1518381045
Provider English Spoken: Y
Provider Language(s) Spoken: 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
Provider Language(s) Spoken: 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
Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield 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	TH 8AM-6PM	Provider Language(s) Spoken:
American Sign Language (ASL):	F 8AM-4PM	Vietnamese
N		Cultural Competency: Y
 Accessibility: CONTACT PROVIDER	TILLMAN, SYLVIA, OD	WEST COAST EYE CARE
Public transportation (within 1/2 mile from Site): 1T	Provider Gender: Female	 6945 EL CAJON BLVD
 Hours: M-F 9:30AM-6PM SA 9AM-3PM	License Number: 9726	SAN DIEGO, CA 92115
	NPI: 1174730824	 Phone: (619) 697-4600
	Provider English Spoken: Y	Fax: (619) 697-2410
	Cultural Competency: Y	 After Hours Phone: (619) 697-4600
	JASMINE P NGUYEN OD INC	Accepting New Patients: Yes
TAVASSOLI, SARA, OD	 4029 43RD ST STE 300	 Site English Spoken: Y
Provider Gender: Female	SAN DIEGO, CA 92105	Min/Max Age: 0\None
License Number: 13395	 Phone: (619) 284-3937	Gender Restriction: No Gender restriction
NPI: 1184764011	Fax: (619) 284-3938	American Sign Language (ASL):
Provider English Spoken: Y	 After Hours Phone: (619) 284-3937	N
Cultural Competency: Y	Accepting New Patients: Yes	 Accessibility: CONTACT PROVIDER
WEST COAST EYE CARE	 Site English Spoken: Y	Public transportation (within 1/2 mile from Site): 1U
 6945 EL CAJON BLVD	 Site Languages(s) Spoken: Spanish, Vietnamese	 Hours: M 7:30AM-4:30PM
SAN DIEGO, CA 92115	Min/Max Age: 0\None	TU 8AM-5PM
 Phone: (619) 697-4600	Gender Restriction: No Gender restriction	W 8:30AM-5PM
Fax: (619) 697-2410	American Sign Language (ASL):	TH 8AM-6PM
 After Hours Phone: (619) 697-4600	N	F 8AM-4PM
Accepting New Patients: Yes	 Accessibility: CONTACT PROVIDER	
 Site English Spoken: Y	Public transportation (within 1/2 mile from Site): 1T	TON-NU, MY LINH, OD
Min/Max Age: 0\None	 Hours: M-F 9AM-5PM SA 9AM-1PM	Provider Gender: Female
Gender Restriction: No Gender restriction		License Number: 34990
American Sign Language (ASL):		NPI: 1245733476
N		Provider English Spoken: Y
 Accessibility: CONTACT PROVIDER	TO, BRITTANY, OD	Cultural Competency: Y
Public transportation (within 1/2 mile from Site): 1U	Provider Gender: Female	WEST COAST EYE CARE
 Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM	License Number: 10651	 6945 EL CAJON BLVD
	NPI: 1306997143	SAN DIEGO, CA 92115
	Provider English Spoken: Y	 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

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken: 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

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

Provider Language(s) Spoken: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 10AM-3PM
F 10AM-5PM
SA 9AM-1PM

VAN HOOSE, MARC, OD

Provider Gender: Male
License Number: 12667
NPI: 1932280054
Provider English Spoken: Y
Provider Language(s) Spoken:
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

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken:
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
Min/Max 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

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s) Spoken:
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

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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): 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

 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

SAN MARCOS

GARFF, KEVIN, MD

Provider Gender: Male

License Number: A160988

NPI: 1609258920

Provider English Spoken: Y

Provider Language(s) Spoken:

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

Min/Max 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

Provider Language(s) Spoken:
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

Min/Max 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

Provider Language(s) Spoken:

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SANTA FE RD STE 12

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max 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

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): 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 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 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

TRAN, MICHAEL, OD

Provider Gender: Male
License Number: 14530
NPI: 1649524216
Provider English Spoken: Y
Provider Language(s) Spoken: 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 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 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

SPRING VALLEY

KALRA, ANKUR, OD

Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken: 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

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 9AM-6PM
SA 9AM-5PM

KEDDINGTON, JOAN, OD

Provider Gender: Female
License Number: 6263

NPI: 1992872691

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

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 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 9AM-6PM
SA 9AM-5PM

KING, MARY, OD

Provider Gender: Female
License Number: 13711
NPI: 1578792107

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

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

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

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

Provider Language(s) Spoken:
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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Provider Language(s) Spoken: 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-TH 9AM-5PM
F 9AM-1PM

VISTA

DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518

Provider English Spoken: Y

Provider Language(s) Spoken: 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 1/2 mile from Site): 1T

⌚ 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

Provider Language(s) Spoken: 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

Provider Language(s) Spoken: Korean, Spanish

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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 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 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

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): 1T

Hours: M-TH 10AM-5PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

KINDERSPECS-GOOD EYES

OPTOMETRY

110 CIVIC CENTER DR STE
204

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. 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

CARLSBAD

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

 7632 CORTINA CT
CARLSBAD, CA 92009
 Phone: (760) 707-9256
 After Hours Phone: (760)
707-9256
 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: (760)
707-9256

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

 7632 CORTINA CT
CARLSBAD, CA 92009
 Phone: (760) 707-9256

 After Hours Phone: (760)
707-9256
 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: (760)
707-9256

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 Ex
isting Patients: CHRIS.OCONN
OR@JOINTANGELO.COM
Phone for New Referrals and
Existing Patients: (904)
671-2995

CULVER CITY

MEDZED PHYSICIAN SERVICES INC

 300 CORPORATE POINTE
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

*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)

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

MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE
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

EL CAJON

LA MAESTRA

COMMUNITY HEALTH CENTERS

165 S 1ST ST

EL CAJON, CA 92019

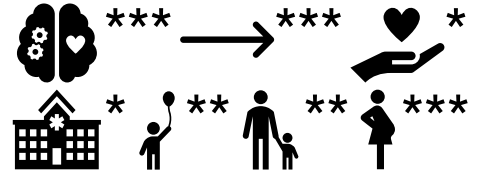
Phone: (619) 510-4641

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

*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

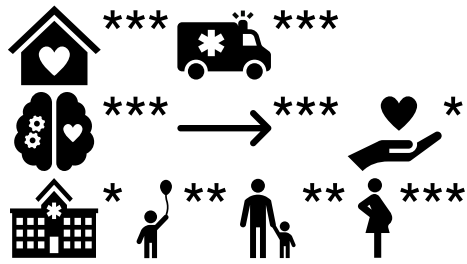
blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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@LAMA.ESRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641

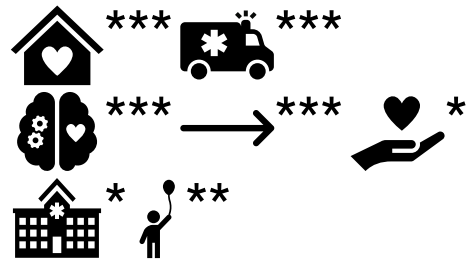
Mailing Address: 4060 FAIRMO
UNT AVE; San Diego; CA; 92105

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

INTEGRATED HEALTH PARTNERS

 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (833) 867-4642
 After Hours Phone: (833) 867-4642
 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: (833) 867-4642
Mailing Address: PO BOX 57216
9; Tarzana; CA; 91357
JI ECM Provider Billing- FFS
(PAVE Enrollment)
JI ECM Provider
Services-Warm Handoffs Only

EL SEGUNDO

24HR HOMECARE LLC

 200 N PACIFIC COAST
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

*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)

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

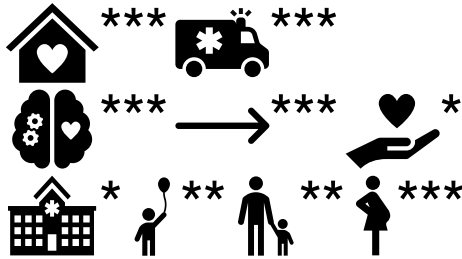
Phone: (619) 273-3295

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@sdweillnesscollaborative.org

Phone for New Referrals and Existing Patients: (619) 273-3295

Mailing Address: 1084 N EL CAMINO REAL STE B; Encinitas; CA; 92024

JI ECM Provider Billing- FFS (PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services and Participating in Warm Handoffs

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL STE B149

ENCINITAS, CA 92024

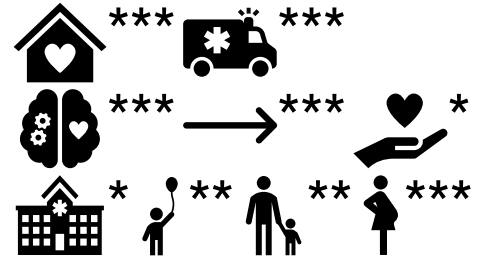
Phone: (619) 273-3295

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@sdweillnesscollaborative.org

Phone for New Referrals and Existing Patients: (619) 273-3295

Mailing Address: 1084 N EL CAMINO REAL STE B; Encinitas; CA; 92024

JI ECM Provider Billing- FFS (PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services and Participating in Warm Handoffs

*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)

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
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (310)
280-5203

TITANIUM HEALTHCARE

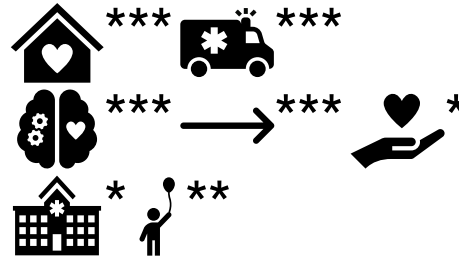
 500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
 Phone: (310) 280-5203
 After Hours Phone: (310)
280-5203
 Accessibility: CONTACT

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

INTEGRATED HEALTH PARTNERS

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (833) 867-4642
 After Hours Phone: (833)
867-4642
 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: (833)
867-4642
Mailing Address: PO BOX 57216
9; Tarzana; CA; 91357
JI ECM Provider Billing- FFS
(PAVE Enrollment)
JI ECM Provider
Services- Warm Handoffs Only

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

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
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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)

Services, Recuperative Care
(Medical Respite), Short-Term
Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (760)
489-6380

INTEGRATED HEALTH PARTNERS

215 S HICKORY ST
ESCONDIDO, CA 92025
Phone: (833) 867-4642
After Hours Phone: (833)
867-4642
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

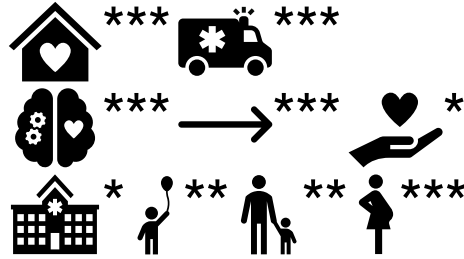
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (833)
867-4642

FALLBROOK

INTEGRATED HEALTH PARTNERS

1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (951) 616-7026
After Hours Phone: (951)
616-7026
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Email for New Referrals and Ex

isting Patients: cmreferrals@ch
sica.org

Phone for New Referrals and
Existing Patients: (951)
616-7026

Mailing Address: PO BOX 57216
9; Tarzana; CA; 91357

JI ECM Provider Billing- FFS
(PAVE Enrollment)

JI ECM Provider

Services-Warm Handoffs Only

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: ibclinic.org

ECM Population of Focus:



*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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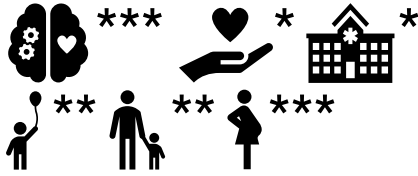
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



Community Supports Services:
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org

Phone for New Referrals and Existing Patients: (619) 429-3733

INTEGRATED HEALTH PARTNERS

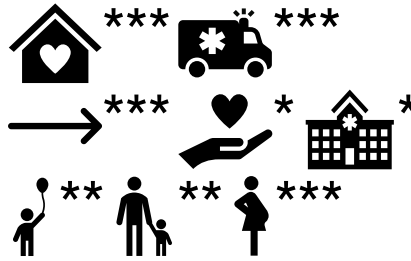
949 PALM AVE
IMPERIAL BEACH, CA 91932

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

Mailing Address: PO BOX 57216
9; Tarzana; CA; 91357

Jl ECM Provider Billing- FFS
(PAVE Enrollment)

Jl ECM Provider

Services-Warm Handoffs Only

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: 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

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
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blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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

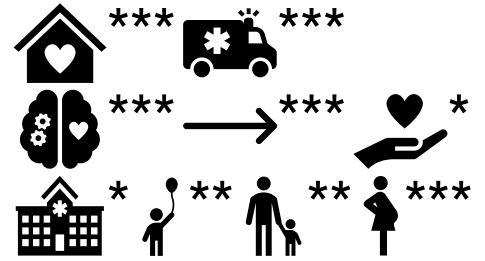
Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



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

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
Phone: (323) 276-6471
After Hours Phone: (323)
276-6471
Hours: M-F 7:30AM-4PM
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
Hours: M-F 7:30AM-4PM
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

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

NATIONAL CITY

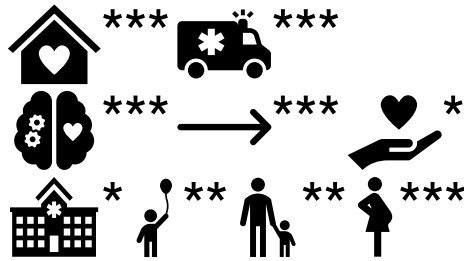
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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:



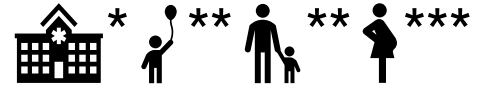
Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMA
ESTRA.ORG
Phone for New Referrals and Existing Patients: (619)
510-4641

Mailing Address: 4060 FAIRMO
UNT 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

 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@LAMA
ESTRA.ORG
Phone for New Referrals and Existing Patients: (619)
510-4641

Mailing Address: 4060 FAIRMO
UNT 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

ORINDA

**PATHWAY HOME
SOLUTIONS INC**

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

 2 BIRCH CT
ORINDA, CA 94563
 Phone: (209) 601-0734
 After Hours Phone: (209) 601-0734
 Accessibility: CONTACT PROVIDER
 Website: N/A

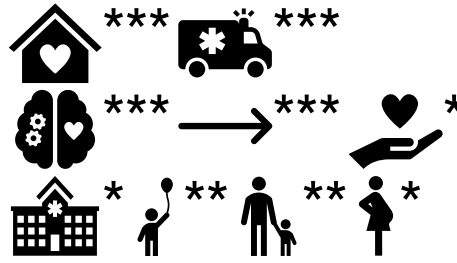
Community Supports Services:
Environmental Accessibility
Adaptations (Home
Modifications)
Street Medicine Provider: N
Phone for New Referrals and
Existing Patients: (209)
601-0734

PLAYA DEL REY

NURTURING CARE LLC

 322 CULVER BLVD STE 1151
PLAYA DEL REY, CA 90293
 Phone: (323) 622-4911
 After Hours Phone: (323) 622-4911
 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: ADMIN@NURTURINGCARELLC.COM
Phone for New Referrals and Existing Patients: (323) 622-4911

Mailing Address: 13736 STOCKBROOK RD; Moreno Valley; CA; 92553

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

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

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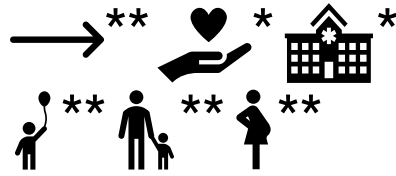
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

 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:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: network@fullcirclehcn.org
Phone for New Referrals and Existing Patients: (888)
749-8877
Mailing Address: 2201 K ST; Sacramento, CA; 95816

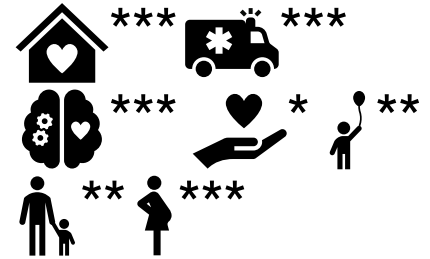
JI ECM Provider Billing- FFS
(PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

SAN DIEGO

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

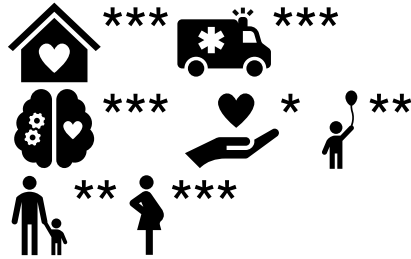
*الكبار **الأطفال ***الكبار والأطفال على حد سواء
ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.
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اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على
blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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@co

mresearch.org

Phone for New Referrals and
Existing Patients: (619)
507-9333

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:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@co

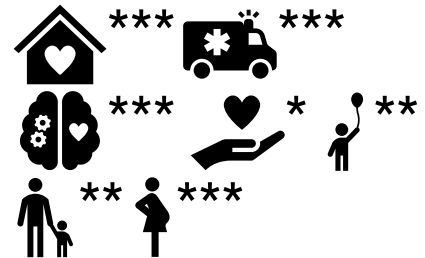
mresearch.org

Phone for New Referrals and
Existing Patients: (619)
507-9333

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:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@co

*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)

mresearch.org

Phone for New Referrals and Existing Patients: (619) 507-9333

HORIZON RECUPERATIVE CARE

3423 CHANNEL WAY
SAN DIEGO, CA 92110

Phone: (858) 326-1100

After Hours Phone: (858) 326-1100

Accessibility: CONTACT PROVIDER

Website: www.horizoncenters.org

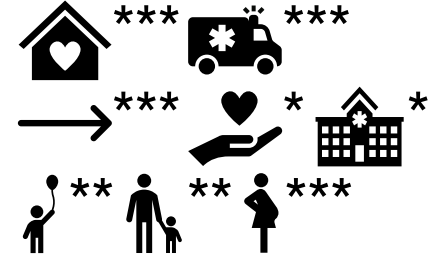
Community Supports Services: Recuperative Care (Medical Respite), Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (858) 326-1100

Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Accessibility: CONTACT PROVIDER
Website: ibclinic.org
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

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
Mailing Address: PO BOX 57216
9; Tarzana; CA; 91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider

IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD
SAN DIEGO, CA 92154

INTEGRATED HEALTH PARTNERS

1016 OUTER RD
SAN DIEGO, CA 92154

*الكبار **الأطفال ***الكبار والأطفال على حد سواء
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Services-Warm Handoffs Only

**INTEGRATED HEALTH
PARTNERS**

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
 *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: VHC_ECM@neighborhoodhealth.org

*Phone for New Referrals and
Existing Patients: (619)
645-6405*

**INTEGRATED HEALTH
PARTNERS**

 3710 RUFFIN RD
SAN DIEGO, CA 92123
 *Phone: (619) 542-4381*
 *After Hours Phone: (619) 542-4381*
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
ECM Population of Focus:



Community Supports Services:
N/A

*Street Medicine Provider: N
Email for New Referrals and Ex
isting Patients: bescalante@ih
psocal.org*

*Phone for New Referrals and
Existing Patients: (619)
542-4381*

**INTEGRATED HEALTH
PARTNERS**

 4004 BEYER BLVD
SAN DIEGO, CA 92173
 *Phone: (833) 503-5910*
 *After Hours Phone: (833) 503-5910*

 *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@syhealth.org*

*Phone for New Referrals and
Existing Patients: (833)
503-5910*

**FAMILY HEALTH
CENTERS OF SAN DIEGO**

 823 GATEWAY CENTER
WAY
SAN DIEGO, CA 92102
 *Phone: (619) 876-4450*
 *After Hours Phone: (619)*

*الكبار **الأطفال ***الكبار والأطفال علمي حد سواء

ECM+ والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

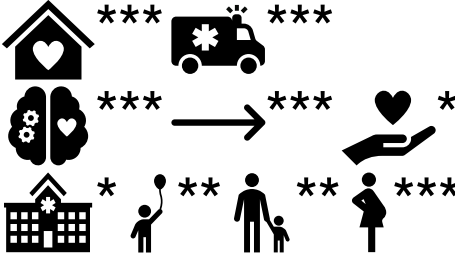
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي

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إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

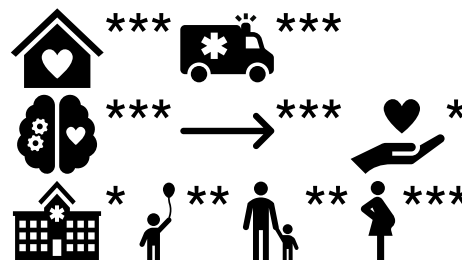
876-4450
 Accessibility: CONTACT PROVIDER
 Website: N/A
 ECM Population of Focus:

 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

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

FATHER JOES VILLAGES

 16 15TH ST
 SAN DIEGO, CA 92101
 Phone: (619) 645-6405
 After Hours Phone: (619)

*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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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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

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:
N/A

Street Medicine Provider: N

Email for New Referrals and Ex

isting Patients: ecm@211sandie 810-8668

go.org

Phone for New Referrals and
Existing Patients: (858)
380-5750

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:
Day Habilitation
Programs, 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)

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:
Day Habilitation
Programs, 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

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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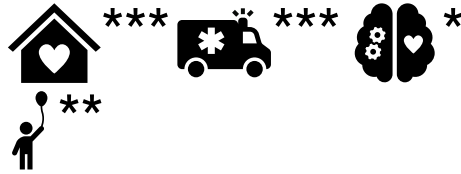
إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. يمكنك الزيارة عبر الإنترنت على

blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Accessibility: CONTACT PROVIDER
 Website: www.sdfamilycare.org

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: www.sdfamilycare.org

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) 500-7547
 After Hours Phone: (858) 500-7547
 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: amandas@lightbridgemedical.com
 Phone for New Referrals and Existing Patients: (858) 500-7547

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

MCALISTER INSTITUTE

*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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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

 2506 MARKET ST
SAN DIEGO, CA 92102
 Phone: (916) 442-0277
 After Hours Phone: (916) 442-0277
 Accessibility: CONTACT PROVIDER
 Website: N/A
Community Supports Services:
Sobering Centers
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (916) 442-0277

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:



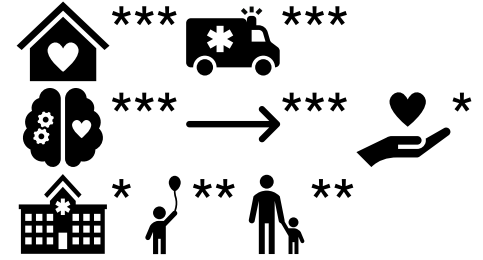
Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619) 354-1409
Mailing Address: 4849 RONSON CT STE 207; San Diego; CA; 92111

JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Warm Handoffs Only

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

JEWISH FAMILY SERVICE

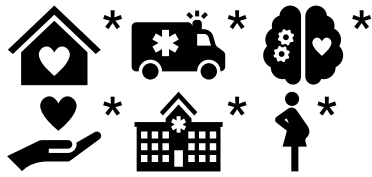
*الكبار **الأطفال ***الكبار والأطفال على حد سواء
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

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

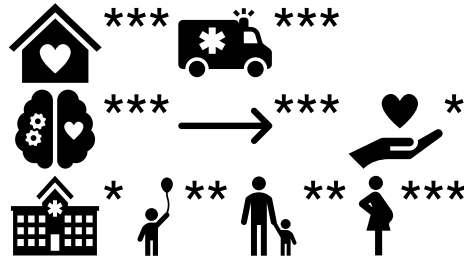
Phone for New Referrals and

Existing Patients: (858)
637-3221

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 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

*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

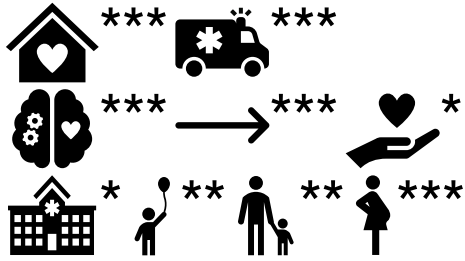
اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين

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)

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@LAMA
ESTRA.ORG

Phone for New Referrals and Existing Patients: (619) 510-4641

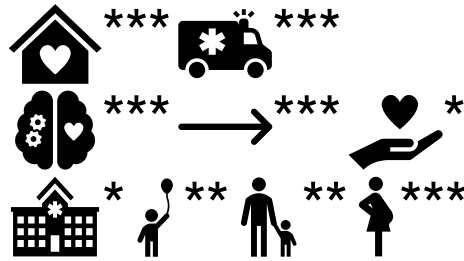
Mailing Address: 4060 FAIRMOUNT AVE; San Diego; CA; 92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider

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@LAMA

ESTRA.ORG

Phone for New Referrals and Existing Patients: (619) 510-4641

Mailing Address: 4060 FAIRMOUNT AVE; San Diego; CA; 92105
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Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:

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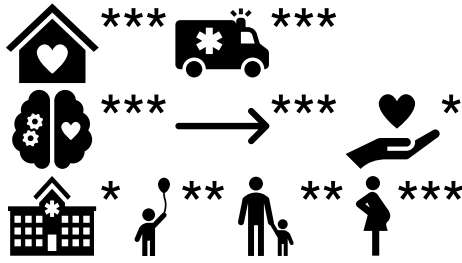
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



Community Supports Services:
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients: ECM.CS@LAMA
ESTRA.ORG

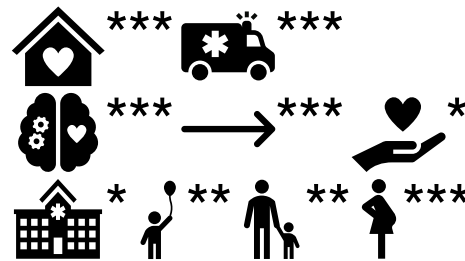
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510-4641

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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

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@LAMA
ESTRA.ORG

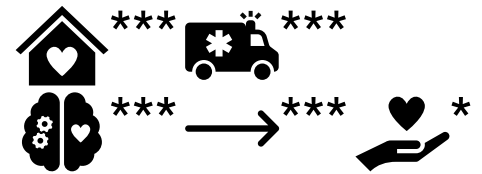
Phone for New Referrals and Existing Patients: (619)
510-4641

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After Hours Phone: (619)
510-4641
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PROVIDER
Website: N/A

ECM Population of Focus:



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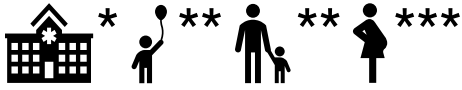
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Community Supports Services:
N/A

Street Medicine Provider: N

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ESTRA.ORG

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510-4641

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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

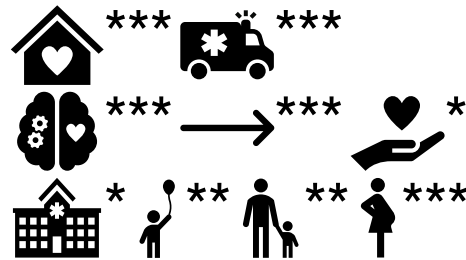


Accessibility: CONTACT PROVIDER



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@LAMA
ESTRA.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

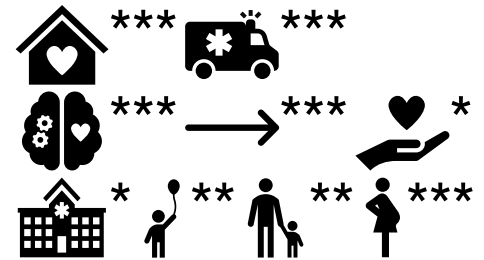


Accessibility: CONTACT PROVIDER



Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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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)

Street Medicine Provider: N

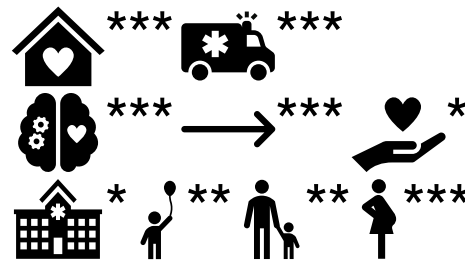
Website: N/A

Handoffs

Email for New Referrals and Existing Patients: ECM.CS@LAMA

ECM Population of Focus:

ESTRA.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

Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients: ECM.CS@LAMA

ESTRA.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

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE

SAN DIEGO, CA 92123

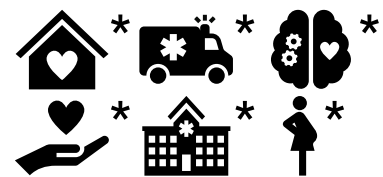
Phone: (858) 637-3221

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: ECM.CS@LAMA

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

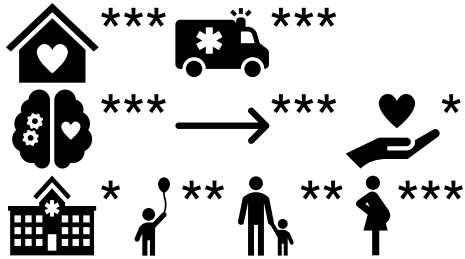
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

isting Patients: calaim@jfssd.org
g
Phone for New Referrals and
Existing Patients: (858)
637-3221

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

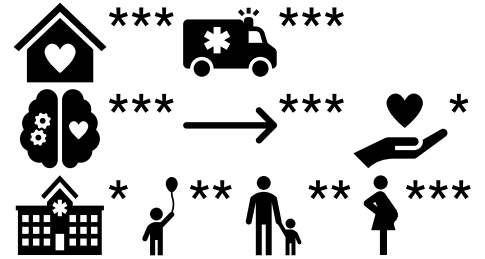
Email for New Referrals and Ex
isting Patients: ECM.CS@LAMA
ESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060 FAIRMO
UNT 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 Ex
isting Patients: ECM.CS@LAMA
ESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)
510-4641

Mailing Address: 4060 FAIRMO
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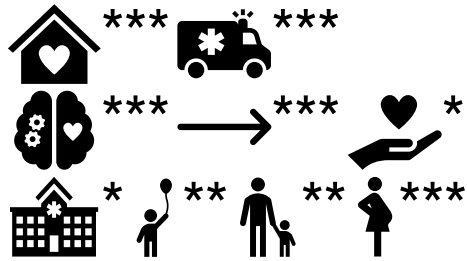
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510-4641
 Accessibility: CONTACT
PROVIDER
 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMA
ESTRA.ORG
Phone for New Referrals and
Existing Patients: (619)

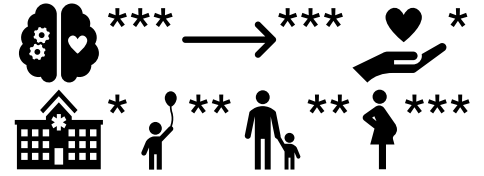
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Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION

 3530 CAMINO DEL RIO N
STE 300
SAN DIEGO, CA 92108
 Phone: (619) 398-4585
 After Hours Phone: (619)
398-4585
 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@voasw.org
Phone for New Referrals and
Existing Patients: (619)
398-4585

Mailing Address: 3530 CAMINO
DEL RIO N STE 300; San Diego;
CA; 92108
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(PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
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Handoffs

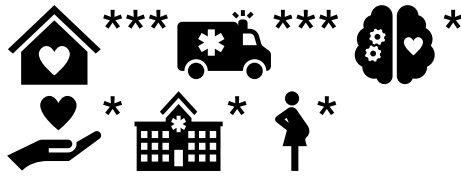
SAN FERNANDO

PARTNERS IN CARE FOUNDATION

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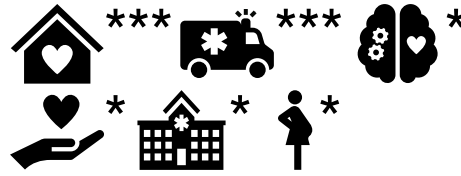
 732 MOTT ST STE 150
SAN FERNANDO, CA 91340
 Phone: (747) 500-4609
 After Hours Phone: (747)
500-4609
 Accessibility: CONTACT
PROVIDER
 Website: N/A
ECM Population of Focus:



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:



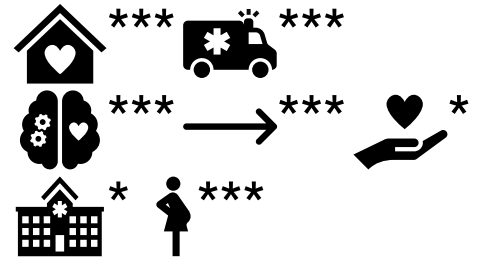
Community Supports Services:
Housing Tenancy and
Sustaining Services, Housing
Transition Navigation
Services, Personal Care and
Homemaker Services, Respite
Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@picf.org
Phone for New Referrals and Existing Patients: (747)

500-4609

SAN MARCOS

INTEGRATED HEALTH PARTNERS

 150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 566-1922
 After Hours Phone: (760)
566-1922
 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: eva.diaz-leon@truecare.org
Phone for New Referrals and

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طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرد غير المحمي
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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)

Existing Patients: (760)

566-1922

Mailing Address: PO BOX 57216
9; Tarzana; CA; 91357

JI ECM Provider Billing- FFS
(PAVE Enrollment)

JI ECM Provider

Services-Warm Handoffs Only

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

Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and Ex
isting Patients: ecmteam@vcc.
org

Phone for New Referrals and
Existing Patients: (760)

631-5000

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

VISTA

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:



*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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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

Spanish

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

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

Spanish

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

Spanish

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

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

Spanish

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
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

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.

L. مرافق الرعاية العاجلة لدى Blue Shield Promise

 (619) 790-7800  (619) 790-7800  SU-SA 8AM-8PM  Accessibility: CONTACT PROVIDER  https://www.afcurgentcare.com/san-diego/ Accepting New Patients: No	 (619) 736-4600  (619) 736-4600  SU-SA 8AM-8PM  Accessibility: CONTACT PROVIDER  https://www.afcurgentcare.com/san-diego/ Accepting New Patients: No	 (858) 900-3550  (858) 900-3550  SU-SA 8AM-8PM  Accessibility: CONTACT PROVIDER  https://www.afcurgentcare.com/san-diego/ Accepting New Patients: No
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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

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466

 8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

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

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: 1558788620

 5671 BALBOA AVE
SAN DIEGO, CA 92111

 (858) 800-2880
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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

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
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 SU 1PM-10PM
 M-F 4PM-10PM
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 *Accessibility:* CONTACT PROVIDER
 N/A
 Accepting New Patients: No

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SPECIALISTS SAN DIEGO MED FNDTN

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 M-F 4PM-10PM
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 N/A
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 **Accessibility:** CONTACT PROVIDER

 N/A

Accepting New Patients: No

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 **Accessibility:** CONTACT PROVIDER

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M-F 4PM-10PM
SA 1PM-10PM
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 N/A
Accepting New Patients: No

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M-F 4PM-10PM

SA 1PM-10PM

 **Accessibility:** CONTACT PROVIDER

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Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

 N/A
Accepting New Patients: No

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M-F 4PM-10PM
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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

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

 (858) 966-1720
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 *Accessibility:* CONTACT PROVIDER
 N/A
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

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 CHULA VISTA, CA 91910
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 *Accessibility:* CONTACT PROVIDER
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 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

ESCONDIDO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197
 2125 CITRACADO PKWY
 STE 100
 ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8AM-5PM
 *Accessibility:* CONTACT PROVIDER
 N/A
 Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197
 2125 CITRACADO PKWY
 STE 100
 ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8AM-5PM
 *Accessibility:* CONTACT PROVIDER
 N/A
 Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197
 2125 CITRACADO PKWY
 STE 100
 ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8AM-5PM
 *Accessibility:* CONTACT PROVIDER
 N/A
 Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

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ESCONDIDO, CA 92029

 (760) 755-7600

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 N/A

Accepting New Patients: No

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8AM-5PM

 Accessibility: CONTACT PROVIDER

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LA MESA

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

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OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

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 OCEANSIDE, CA 92056
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SAN DIEGO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
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(858) 966-8800

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

(858) 966-8800

(858) 966-8800

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: No

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 4305 UNIVERSITY AVE STE 150

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 (619) 280-2905

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 N/A

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(619) 280-2905

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Accessibility: CONTACT
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N/A

Accepting New Patients: No

SOUTHBAY URGENT CARE INC

NPI: 1558746750

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.southbayurgetncare.com/>

Accepting New Patients: No

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