Directorio de Proveedores

Medi-Cal

Condado de San Diego | February 2026

blue california

Promise Health Plan

Medi_24_325_SD_SP_012425

blue CALIFORNIA | PROMISE

Notice of Availability of Language Services and Auxiliary Aids and Services

English
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.

العربية (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 بريل والخط الكبير. اتصل بـ 1-855-699-5557 (TTY:711). هذه الخدمات مجانية.

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

ខ្មែរ (Cambodian)
ចំណាំ៖ បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក សូម ទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY:711)។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរផុស សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជាអក្សរពុម្ពធំ ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទមកលេខ 1-855-699-5557 (TTY:711)។ សេវាកម្មទាំងនេះមិនគិតថ្លៃឡើយ។

中文 (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，例如盲文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。

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

हिंदी (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।

Hmoob (Hmong)
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 (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。

한국어 (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.

Índice

A. Introducción 6
Aviso de no discriminacion 9
Cómo presentar una queja 9
Red de proveedores de Blue Shield Promise 11
Indicadores de accesibilidad física en el Directorio de Proveedores 13
Explicaciones de los códigos de accesibilidad 14
Cómo leer las listas de proveedores 15
Reglas para recibir atención a tiempo 16
B. Clínicas de salud federalmente calificadas 29
C. Red de proveedores de atención primaria 62
D. Red de proveedores médicos especialistas 541
E. Red de hospitales 1644
F. Centros de atención a largo plazo (LTC, por sus siglas en inglés) y de enfermería especializada (SNF, por sus siglas en inglés) 1649
G. Servicios comunitarios para adultos (CBAS, por sus siglas en inglés): Centros de día para adultos 1658
H. Servicios de apoyo en el hogar (IHSS, por sus siglas en inglés) en el condado 1662
I. Proveedores de salud conductual 1663
J. Proveedores de servicios de la vista 1733
K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención) 1871
L. Centros de atención urgente 1898
M. Índice de atención primaria 1933

A. Introducción

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

Cuando se inscribe en Blue Shield of California Promise Health Plan, es importante que elija un proveedor de atención primaria (PCP, por sus siglas en inglés) para cada miembro. Si no lo hace, Blue Shield Promise elegirá uno por usted. Su PCP será el médico que visitará para recibir atención preventiva y cuando se enferme. Su PCP le referirá a un médico especialista u a otro proveedor especialista cuando sea necesario. La función del PCP es cumplir con sus necesidades de atención de la salud y trabajar con los miembros para mantenerlos saludables.

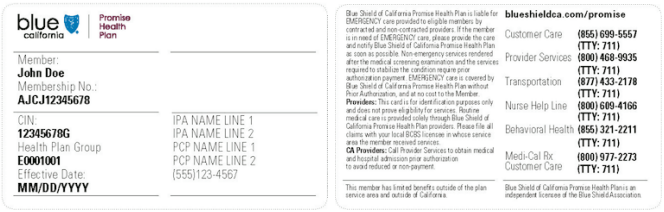
Cómo cambiar de PCP

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

Como miembro de Blue Shield of California Promise Health Plan, recibirá una tarjeta de identificación de miembro como la que aparece en esta página. Deberá mostrar esta tarjeta de identificación cada vez que vea a su médico, use la sala de emergencias o vea a su oculista. Lleve esta tarjeta consigo en todo momento.

Cuando reciba su tarjeta de identificación, asegúrese de que los datos sean correctos. Si no lo son, llame a Servicio al Cliente de Blue Shield of California Promise Health Plan al (855) 699-5557.

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



Tarjeta de identificación de Blue Shield (BIC)

Servicios de farmacia a través de Medi-Cal Rx

El Department of Health Care Services (DHCS, Departamento de Servicios de Atención de la Salud) administra los servicios de farmacia para los miembros de Medi-Cal. Para obtener servicios de farmacia, puede comunicarse con la Línea de Atención Telefónica de Medi-Cal Rx llamando al 1-800-977-2273 las 24 horas, los siete días de la semana o al 711 para los usuarios del sistema TTY, de lunes a viernes, de 8:00 a. m. a 5:00 p. m.

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

La mayoría de las farmacias aceptarán Medi-Cal Rx. Puede comunicarse con la Línea de Ayuda para Miembros de Medi-Cal (1-800-541-5555, TTY 1-800-430-7077) para averiguar si su farmacia acepta Medi-Cal Rx. Si necesita ayuda para encontrar una farmacia, use la herramienta Pharmacy Locator (Buscador de farmacias) de Medi-Cal Rx en **www.Medi-CalRx.dhcs.ca.gov** o llame a la Línea de Atención Telefónica de Medi-Cal Rx al 1-800-977-2273.

Cómo usar este directorio

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

Información importante sobre las listas del directorio

Este Directorio de Proveedores está actualizado a la fecha que aparece en la portada. Es posible que se hayan agregado o quitado PCP después de la impresión de este directorio. No garantizamos que todos los PCP aún acepten miembros nuevos. Para obtener la información más actualizada sobre los PCP en su área, puede visitar **blueshieldca.com/promise** o llamar gratis a Servicio al Cliente de Blue Shield Promise al (855) 699-5557 [TTY: 711]. También puede visitar nuestra oficina de lunes a viernes, de 8:00 a. m. a 6:00 p. m., sin cita previa. Tenemos personal que habla su idioma. También puede visitar nuestro sitio web en **blueshieldca.com/promise**.

Divulgaciones y otra información importante

Algunos proveedores y hospitales no ofrecen uno o más de los siguientes servicios que quizá estén cubiertos por su plan de salud y que usted podría necesitar: planificación familiar; servicios de anticoncepción, incluida la anticoncepción de emergencia; esterilización, incluida la ligadura de trompas inmediatamente después del parto; tratamientos por esterilidad; o aborto, entre otros.

Llame a Servicio al Cliente de Blue Shield Promise al (855) 699-5557 para asegurarse de que puede obtener los servicios de atención de la salud que necesita.

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

Es posible que se necesiten autorizaciones o referencias para obtener acceso a la atención de algunos proveedores. Blue Shield Promise brinda un acceso completo e igualitario a los servicios cubiertos, incluidos los miembros con discapacidad. A todos los proveedores se les ofrece y exige que completen una capacitación sobre competencias culturales.

Servicios de intérpretes

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

- **Personal bilingüe** para brindarle ayuda en su idioma.
- **Servicios de intérpretes,** incluso en lengua de señas estadounidense, para todas sus necesidades de atención de la salud, sin costo para usted. No es necesario que le pida a sus amigos o familiares que se ofrezcan de intérpretes; puede obtener acceso a los servicios de interpretación las 24 horas, los siete días de la semana para obtener lo siguiente:
    - ✓ **Servicios médicos:** visitas al médico, servicios fuera del horario de atención, servicios de atención urgente y clases educativas sobre la salud.
    - ✓ **Servicios no médicos:** Servicio al Cliente, reclamos de los miembros y reuniones orientativas para los miembros.
    - ✓ **Materiales en otros formatos,** como braille, audio o letra grande.

Solo debe llamar a su grupo médico o a Servicio al Cliente de Blue Shield Promise. Si ya programó una cita, asegúrese de pedir un intérprete al menos diez (10) días hábiles antes de su cita.

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

blue CALIFORNIA | PROMISE

AVISO DE NO DISCRIMINACIÓN

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

Blue Shield of California Promise Health Plan proporciona:

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

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

(800) 605-2556 (Los Angeles)
(855) 699-5557 (San Diego)

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

Blue Shield of California Promise Health Plan Customer Service
3840 Kilroy Airport Way, Long Beach, CA 90806
(800) 605-2556 (Los Angeles)
(855) 699-5557 (San Diego)
TTY: 711

CÓMO PRESENTAR UNA QUEJA

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

- Por teléfono: Comuníquese con el Coordinador de Derechos Civiles de Blue Shield of

California Promise Health Plan, de lunes a viernes, de 8:00 a.m. a 6:00 p.m., llamando al (844) 883-2233. Si usted no puede oír o hablar bien, llame a la línea TTY/TDD 711.

- Por escrito: Llene un formulario de queja o escriba una carta, y envíelo(a) a:

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

- En persona: Vaya al consultorio de su médico o a Blue Shield of California Promise Health Plan y diga que desea presentar una queja.

- Por vía electrónica: Visite el sitio web de Blue Shield of California Promise Health Plan www.blueshieldca.com/promise/medi-cal.

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

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

- Por teléfono: Llame al **916-440-7370**. Si no puede hablar u oír bien, llame al **711 (Servicio de Retransmisión de Telecomunicaciones).**

- Por escrito: Llene un formulario de queja o envíe una carta a:

  Deputy Director, Office of Civil Rights Department of Health Care Services
  P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413

  Los formularios de queja están disponibles en http://www.dhcs.ca.gov/Pages/Language_Access.aspx.

- Por vía electrónica: Envíe un correo electrónico a CivilRights@dhcs.ca.gov.

OFICINA DE DERECHOS CIVILES – DEPARTAMENTO DE SALUD Y SERVICIOS HUMANOS DE LOS ESTADOS UNIDOS (U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES)

Si usted cree que ha sido discriminado por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, también puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de los Estados Unidos por teléfono, por escrito o por vía electrónica:

- Por teléfono: Llame al **1-800-368-1019**. Si usted no puede hablar u oír bien, llame al **TTY/TDD 1-800-537-7697.**
- Por escrito: Llene un formulario de queja o envíe una carta a:

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

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

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

Red de Proveedores de Blue Shield Promise

Definiciones e información general

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

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

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

Hospital: Blue Shield Promise tiene contratos con muchos hospitales. Consulte el hospital afiliado del proveedor de atención primaria que quiera elegir.

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

Referencias del Directorio de Proveedores

Dirección del proveedor

Número de teléfono del proveedor

 Número de teléfono del proveedor para llamar fuera del horario de atención

Idiomas que se hablan en el consultorio de este proveedor

Horario de atención del proveedor

Información sobre accesibilidad

Sitio web del proveedor

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

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

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

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

Proveedor de atención primaria (PCP, por sus siglas en inglés): Como miembro de Blue Shield Promise, debe elegir un PCP para sus necesidades de atención de la salud generales. Si no lo hace, elegiremos uno por usted. Todos los PCP aparecen en una lista ordenada por ciudad. Puede elegir cualquiera de los siguientes tipos de médicos:

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

Children's Health Insurance Program (CHIP, Programa de Seguro Médico para Niños): Si el proveedor lo ofrece en California, el programa CHIP se administra por completo a través del programa Medi-Cal. Todos los proveedores que tienen un contrato con un plan de atención administrada (MCP, por sus siglas en inglés) de Medi-Cal para brindar servicios a los niños inscriptos también brindan servicios a los inscriptos en el programa CHIP. No existe otra red ni hay alguna diferencia entre los servicios disponibles para los niños inscriptos en Medi-Cal y los niños inscriptos en el programa CHIP; ambos grupos tienen los mismos beneficios, la misma estructura de financiamiento y los mismos estándares de acceso a proveedores.

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

Indicadores de accesibilidad física en el Directorio Promise de proveedores

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

E: Sala de exámenes

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

EB: Instalaciones externas

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

IB: Instalaciones internas

Las puertas son amplias para permitir el ingreso de personas en silla de ruedas o scooter, y tienen picaportes fáciles de usar. Las rampas internas son anchas y tienen pasamanos. Las escaleras, si las hay, tienen pasamanos.

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

P: Estacionamiento

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

R: Baño

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

T: Camilla y balanza

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

Explicaciones de los códigos de accesibilidad

CÓDIGO	Explicación
P	Estacionamiento
PA	Sala de espera para pacientes
EB	Instalaciones externas
IB	Instalaciones internas
W	Silla de ruedas
R	Baño
E	Sala de exámenes
T	Camilla y balanza

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

Cómo leer las listas de proveedores

La siguiente información puede ayudarle a elegir a su Proveedor de Atención Primaria:

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

Ejemplo:

1. Pediatría
2. Jane Doe, Doctora en Medicina (MD)
3. N.º de id. del proveedor: 1003903704
4. Mujer
5. N.º de licencia: 00A123456
6. NPI: 0123456789
7. Inglés, español, vietnamita, farsi
8. Sí
9. Good Samaritan Hospital
10. Sí
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. Sí/No 18.
18. 0-18
19. Limitado. P, EB, IB, E
20. L-V, de 8:00 a. m. a 5:00 p. m.
21. Sí

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

Reglas para recibir atención a tiempo

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

Perfil de desempeño

Consulte la información detallada sobre la calidad de los hospitales de estas reconocidas organizaciones.

[1] **Cal Hospital Compare**
Visite este sitio web gratis y fácil de usar para conocer las calificaciones de los pacientes según su experiencia. **CalHospitalCompare.org**

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

[2] **Leapfrog**
Leapfrog es un grupo de supervisión sin fines de lucro que recopila información sobre la calidad, el nivel de satisfacción de los pacientes y la seguridad de los proveedores de atención de la salud. **LeapfrogGroup.org**

[3] **Blue Distinction**
Ofrecido por Blue Cross Blue Shield Association, este programa reconoce a los proveedores y médicos que brindan la máxima calidad.

Blue Distinction Centers for Bariatric Surgery ® (Centros Blue Distinction para cirugías bariátricas) **Blueshieldca.com/bariatric**
Blue Distinction Centers for Cardiac Care ® (Centros Blue Distinction para atención cardíaca) **Blueshieldca.com/cardiac**
Blue Distinction Centers for Cellular Immunotherapy ® (Centros Blue Distinction para inmunoterapia celular) **Blueshieldca.com/immuno**
Blue Distinction Centers for Fertility Care ® (Centros Blue Distinction para atención de la fertilidad) **Blueshieldca.com/fertilitycare**
Blue Distinction Centers for Knee and Hip Replacement ® (Centros Blue Distinction para reemplazos de rodilla y cadera) **Blueshieldca.com/replacement**
Blue Distinction Centers for Maternity Care ® (Centros Blue Distinction para atención de la maternidad) **Blueshieldca.com/maternitycare**
Blue Distinction Centers for Substance Use Treatment & Recovery ® (Centros Blue Distinction para el tratamiento y la recuperación del uso de sustancias) **Blueshieldca.com/recovery**
Blue Distinction Centers for Spine Surgery ® (Centros Blue Distinction para cirugías de la columna vertebral) **Blueshieldca.com/spine**

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en **blueshieldca.com/promise/medi-cal**. La información de este directorio de proveedores puede cambiar.

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
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
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
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
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
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
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
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

B. Clínicas de salud federalmente calificadas

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: PG0094125002

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: 1952364747

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.mtnhealth.org

CAMPO

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: PG0095406002

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 428-7952

After Hours Phone: (619) 662-4100

License Number: 55008409

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: P, EB, IB, E, WC, ME

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: PG0095406002

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 428-7952

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: P, EB, IB, E, WC, ME

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

CARLSBAD

TRUECARE

Provider ID: PG0092587008

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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

N
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

TRUECARE
Provider ID: PG0092587008
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

TRUECARE
Provider ID: PG0092587008
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

CHULA VISTA

SAN YSIDRO HEALTH OTAY
Provider ID: PG0068380004
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
License Number: 090000136
NPI: 1922051812
Accepting New Patients: Yes
Min/Max Age: 0\19
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Medical Group/IPA: RADY CHILDRENS HEALTH NETWORK
Website: www.syhealth.org

SAN YSIDRO HEALTH OTAY
Provider ID: PG0047542007
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
License Number: 090000136
NPI: 1922051812
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: P, EB, IB, E, R, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

B. Clínicas de salud federalmente calificadas

CHULA VISTA FAMILY HLTH CTR
Provider ID: PG0025044018
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: P, EB, IB, E, R, T, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS
Provider ID: PG0127835003
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: PG0047560010
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
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: P, EB, IB, E, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
Provider ID: PG0082946002
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

EL CAJON

LA MAESTRA CHC EL CAJON BROADWAY
Provider ID: PG0085229002
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: WC
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

LA MAESTRA CHC-REA AVE
Provider ID: PG0129902003
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): N
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: PG0010344010
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: P, EB, IB, E, R, T, WC
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: PG0084245002
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: P, EB, IB, E, R
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC
Provider ID: PG0025044024
1111 W CHASE AVE
EL CAJON, CA 92020

B. Clínicas de salud federalmente calificadas

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: EB, IB, E, R, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH EL CAJON

Provider ID: PG0111464003
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

ENCINITAS

TRUECARE

Provider ID: PG0092584008
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000638
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM
American Sign Language (ASL): N
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

ESCONDIDO

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: PG0094132002
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: PG0024990059
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
Provider ID: PG0087195005
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL
Provider ID: PG0024990057
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Provider ID: PG0024990053
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: P, EB, IB, E, R, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

ESCONDIDO FAMILY HEALTH CENTER
Provider ID: PG0125224003
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: N/A

FALLBROOK

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
321 E ALVARADO ST
FALLBROOK, CA 92028

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
321 E ALVARADO ST
FALLBROOK, CA 92028

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

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

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR
Provider ID: PG0009519021
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: EB, IB, E, R, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: PG0005455008

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: P, EB, E, R, WC

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

JULIAN

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE

Provider ID: PG0127855003

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: WC

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE

Provider ID: PG0127855003

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: WC

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

LAKESIDE

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: PG0024990055

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: WC

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: PG0085568002

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: P, EB, IB, E

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

NATIONAL CITY

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: PG0047542006

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

Phone: (619) 662-4100

Fax: (619) 259-2811

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: PG0085737002

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

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: PG0047542008

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

Accessibility: WC

Medical Group/IPA: IHP OF

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

SOUTHERN CAL-PHP

Website: www.syhealth.org

OPERATION SAMAHAN - NATIONAL CITY

Provider ID: PG0084147002

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: WC

Medical Group/IPA: OPERATION SAMAHAN

Website: www.opsamheath .org

OPERATION SAMAHAN - NATIONAL CITY

Provider ID: PG0084147002

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844) 200-2426

License Number: 550000148

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: WC

Medical Group/IPA: OPERATION SAMAHAN

Website: www.opsamheath .org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: PG0077626002

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: WC

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: PG0010344011

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: M-F 8AM-5PM

American Sign Language (ASL): N

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

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

OPERATION SAMAHAN GRANGER SCHOOL BASED
Provider ID: PG0084288002
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
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OCEANSIDE

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
4700 N RIVER RD
OCEANSIDE, CA 92057

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: PG0072409009
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

TRUECARE
Provider ID: PG0065019005
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000240
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: PG0092590005
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058
Phone: (760) 736-6767
Fax: (760) 736-6744
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
American Sign Language (ASL): N
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET
Provider ID: PG0084639008
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY
Provider ID: PG0084683008
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): N
Accessibility: WC
Medical Group/IPA: IHP OF

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

TRUECARE

Provider ID: PG0092588009

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: N/A

TRUECARE

Provider ID: PG0092588009

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): N

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: N/A

POWAY

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: PG0092632005

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: N/A

RAMONA

TRUECARE

Provider ID: PG0025086045

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: P, EB, IB, E, R

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

SAN DIEGO

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: PG0083903002

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Medical Group/IPA: OPERATION SAMAHAN
- *Website: www.operationsamahan.org*

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: PG0083903002
- 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: 090000183
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
Medical Group/IPA: OPERATION SAMAHAN
- *Website: www.operationsamahan.org*

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: PG0083903002
- 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
Medical Group/IPA: OPERATION SAMAHAN
- *Website: www.operationsamahan.org*

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Provider ID: PG0094138002
- 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*

American Sign Language (ASL): N
Accessibility: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
- *Website: N/A*

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
Provider ID: PG0085338002
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: PG0083950002
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: PG0082766002
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: P, EB, IB, E, R, T, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
Provider ID: PG0094135002
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
Fax: (619) 238-5551
After Hours Phone: (619) 662-4100
License Number: 090000136
NPI: 1598308926
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: PG0025044022
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: P, EB, IB, E, R, T, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: PG0084186002
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
Min/Max Age: 0\18
Site English Spoken: Y
Cultural Competency: N
Hours: M-TH 8AM-5PM
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: PG0025044022
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: P, EB, IB, E, R, T, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: PG0025044020
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
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: PG0084516002
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER
Provider ID: PG0047560011
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): N
Accessibility: P, EB, IB, E, R, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

FAMILY HEALTH CTR IBARRA
Provider ID: PG0084517002
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: P, EB, IB, E, R, T
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC
Provider ID: PG0049261012
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
License Number: 090000124
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: PG0049261012
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
License Number: 090000672
NPI: 1962483040
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM

B. Clínicas de salud federalmente calificadas

SA 8AM-2PM
American Sign Language (ASL): N
Accessibility: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: PG0049261011
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
License Number: 090000124
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: P, EB, IB, E, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: PG0049261011
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
License Number: 090000672
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: P, EB, IB, E, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT
Provider ID: PG0135214003
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
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
American Sign Language (ASL): N
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: N/A

LA MAESTRA FAMILY CLINIC INC
Provider ID: PG0010344009
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: P, EB, IB, E, R, T, WC
Medical Group/IPA: LA MAESTRA FAMILY CLINIC

B. Clínicas de salud federalmente calificadas

Website: www.lamaestra.org

LINDA VISTA HEALTH CARE CTR

Provider ID: PG0024858006

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 8AM-5:30PM

American Sign Language (ASL): N

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: PG0024858006

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 8AM-5:30PM

American Sign Language (ASL): N

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: PG0092672005

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

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.sdfamilycare.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: PG0084522002

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

B. Clínicas de salud federalmente calificadas

American Sign Language (ASL): N
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: PG0083156002
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: P, EB, IB, E, R, T
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH PRECISION PARK
Provider ID: PG0128177003
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
NPI: 1124782685
Accepting New Patients: No
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

NESTOR COMMUNITY HEALTH CENTER
Provider ID: PG0031643005
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: 1215246996
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: P, IB, E, R, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ibclinic.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: PG0083903002
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
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: PG0083903002
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: 090000183
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
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: PG0083606004
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): N
Medical Group/IPA: OPERATION SAMAHAN
Website: www.opsam.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: PG0083606004
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: 090000183
NPI: 1861933897
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Medical Group/IPA: OPERATION SAMAHAN
Website: www.opsam.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: PG0084522007
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

B. Clínicas de salud federalmente calificadas

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: PG0025044045
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
License Number: 090000113
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: PG0025044045
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
License Number: 090000612
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: PG0025044045
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
License Number: 550000024
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: PG0025044019
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
License Number: 090000113
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5:30PM SA 8AM-5PM
American Sign Language (ASL): N
Accessibility: ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: PG0025044019
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
License Number: 090000612
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None

B. Clínicas de salud federalmente calificadas

Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5:30PM SA 8AM-5PM
American Sign Language (ASL): N
Accessibility: ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: PG0025044019
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
License Number: 550000024
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5:30PM SA 8AM-5PM
American Sign Language (ASL): N
Accessibility: ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: PG0047560008
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: P, IB, E, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: PG0084437002
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
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HEALTH CTR OF SD-ELM ST

Provider ID: PG0083911002
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: IB, E, R
Medical Group/IPA: FAMILY

B. Clínicas de salud federalmente calificadas

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

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Provider ID: PG0086361007
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

OPERATION SAMAHAN - MIRA MESA
Provider ID: PG0083606002
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
Accessibility: P, EB, IB, E, R, WC, ME
Medical Group/IPA: OPERATION SAMAHAN
Website: www.opsam.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: PG0083606002
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
License Number: 090000183
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
Accessibility: P, EB, IB, E, R, WC, ME
Medical Group/IPA: OPERATION SAMAHAN
Website: www.opsam.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: PG0083903002
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
Medical Group/IPA:

B. Clínicas de salud federalmente calificadas

OPERATION SAMAHAN
Website: www.operationsamahan.org

SAN MARCOS

TRUECARE
Provider ID: PG0025086048
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: PG0025086048
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: PG0025086048
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: PG0025086044
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: 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: P, EB, IB, E, R, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: PG0025086044
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: 1245246917
Accepting New Patients: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

B. Clínicas de salud federalmente calificadas

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: P, EB, IB, E, R, T, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: PG0025086044
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 SA 8AM-5PM
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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: PG0047560012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: PG0047448003
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
License Number: 090000140
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
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: PG0047542009
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

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SANTEE

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE
Provider ID: PG0094129002
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: P, EB, IB, E, WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: PG0025044021
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: ME
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

VALLEY CENTER

NEIGHBORHOOD HEALTHCARE
Provider ID: PG0024990062
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE
Provider ID: PG0024990062
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

B. Clínicas de salud federalmente calificadas

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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE
Provider ID: PG0024990062
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE
Provider ID: PG0024990062
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

VISTA

VCC DURIAN
Provider ID: PG0083886012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VCC DURIAN
Provider ID: PG0083886012
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: WC
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: PG0085050005

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

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: WC

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

C. Red de proveedores de atención primaria

ALPINE

FAMILY PRACTICE

BAUTISTA, LUIS

License Type: MD
Provider ID: 100042456040
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

BAUTISTA, LUIS

License Type: MD
Provider ID: 100042456040
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

DUBE, BIANCA

License Type: MD
Provider ID: 100374087004
Provider Gender: Female
License Number: C172036
NPI: 1740535152
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

DUBE, BIANCA

License Type: MD
Provider ID: 100374087004
Provider Gender: Female
License Number: C172036
NPI: 1740535152
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 100086435022
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 100086435022
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL
License Type: MD
Provider ID: 100394379014
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: 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

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL
License Type: MD
Provider ID: 100394379014
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider ID: 100174329023
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider ID: 100174329023
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: 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: P, EB, IB, E, R, T, WC

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,
Provider ID: PG0094125002
NPI: 1952364747
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)

C. Red de proveedores de atención primaria

662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,
Provider ID: PG0094125002
NPI: 1952364747
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

RYAN, DANA
License Type: MD
Provider ID: 100315031011
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

RYAN, DANA
License Type: MD
Provider ID: 100315031011
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

STENSMAN, LARS
License Type: MD
Provider ID: 100362697008
Provider Gender: Male
License Number: A158569

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1659638062
Provider English Spoken: Y
Provider Language(s) Spoken: Danish, French, Norwegian, Swedish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

STENSMAN, LARS
License Type: MD
Provider ID: 100362697008
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: 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: P, EB, IB, E, R, T, WC

CAMPO

FAMILY PRACTICE

BAUM, PETER
License Type: DO
Provider ID: 100333446018
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

BAUM, PETER
License Type: DO
Provider ID: 100333446019
Provider Gender: Male
NPI: 1174919971
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: SU 10AM-4PM M-F 8:30AM-5:30PM

C. Red de proveedores de atención primaria

SA 8AM-2:30PM

FAMILY PRACTICE

BAUM, PETER

License Type: DO

Provider ID: 100333446018

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

CAMPOS, PRISCILLA

License Type: MD

Provider ID: 100337713006

Provider Gender: Female

License Number: A152651

NPI: 1508217399

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

Hours: M-F 8AM-5PM

FAMILY PRACTICE

CAMPOS, PRISCILLA

License Type: MD

Provider ID: 100337713006

Provider Gender: Female

License Number: A152651

NPI: 1508217399

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORONADO, MYRNA

License Type: MD

Provider ID: 100324282011

Provider Gender: Female

License Number: A112627

NPI: 1710147566

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 100324282011
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 100086435020
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: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 100086435020
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: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

ORTIZ, KENNETH
License Type: MD
Provider ID: 100335275036
Provider Gender: Male
License Number: A156607
NPI: 1356761571
Provider English Spoken: Y
Cultural Competency: N

C. Red de proveedores de atención primaria

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

ORTIZ, KENNETH
License Type: MD
Provider ID: 100335275036
Provider Gender: Male
License Number: A156607
NPI: 1356761571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

ROGERS, MATTHEW
License Type: DO
Provider ID: 100367119004
Provider Gender: Male
License Number: 20A18400
NPI: 1639606130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

ROGERS, MATTHEW
License Type: DO
Provider ID: 100367119009
Provider Gender: Male
NPI: 1639606130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

C. Red de proveedores de atención primaria

ROGERS, MATTHEW
License Type: DO
Provider ID: 100367119004
Provider Gender: Male
License Number: 20A18400
NPI: 1639606130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME

FAMILY PRACTICE

SAIDRO, LUZVIMINDA
License Type: MD
Provider ID: 100109715017
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SAIDRO, LUZVIMINDA
License Type: MD
Provider ID: 100109715017
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,
Provider ID: PG0095406002
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) 428-7952
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,
Provider ID: PG0095406002
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) 428-7952
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC
License Type: MD
Provider ID: 100010052009
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: 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: P, EB, IB, E, WC, ME

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC
License Type: MD
Provider ID: 100010052009
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: 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: P, EB, IB, E, WC, ME

CARLSBAD

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER
License Type: NPF
Provider ID: 100263683012
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER
License Type: NPF
Provider ID: 100263683012
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

TRUECARE,
Provider ID: PG0092587008
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
Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

TRUECARE,
Provider ID: PG0092587008
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
Hours: M-F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

BURGAMY, ELIZABETH
License Type: MD
Provider ID: 100096574020
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: No
RADY CHILDRENS HEALTH NETWORK
3257 CAMINO DE LOS

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

PEDIATRICS

COLEMAN, ANDERSEN
License Type: MD
Provider ID: 100472288004
Provider Gender: Female
NPI: 1831832500
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

IYENGAR, RADHA
License Type: MD
Provider ID: 100083390005
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: 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
Hours: M-F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

IYENGAR, RADHA
License Type: MD
Provider ID: 100083390005
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: 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
Hours: M-F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

LEE, PATRICIA
License Type: MD
Provider ID: 100083510014
Provider Gender: Female
NPI: 1598800559
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CAMINO HOSPITAL, RADY

C. Red de proveedores de atención primaria

CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

TANAKA, MARY
License Type: MD
Provider ID: 100168326004
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: 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
Hours: M-F 8AM-5PM

CHULA VISTA

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN CARLOS
License Type: NP
Provider ID: 100306284003
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN CARLOS
License Type: NP
Provider ID: 100306284003
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005005
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005005
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA
License Type: NP
Provider ID: 100334532002
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA
License Type: NP
Provider ID: 100334532002
Provider Gender: Female
License Number: NP95001705

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1912304569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ALANIZ, MATEO
License Type: MD
Provider ID: 100220769003
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

ALANIZ, MATEO
License Type: MD
Provider ID: 100220769003
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

AMANAT, SOROOSH
License Type: MD
Provider ID: 100346972006
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM

FAMILY PRACTICE

AMANAT, SOROOSH
License Type: MD
Provider ID: 100346972006
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA
License Type: MD
Provider ID: 100300002008
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA
License Type: MD
Provider ID: 100300002008
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

BECERRA, MAURA
License Type: MD
Provider ID: 100443851008

C. Red de proveedores de atención primaria

Provider Gender: Female
License Number: A191381
NPI: 1710561279
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

BECERRA, MAURA
License Type: MD
Provider ID: 100443851008
Provider Gender: Female
License Number: A191381
NPI: 1710561279
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

CAMPOS, MELISSA
License Type: MD
Provider ID: 100334357002
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

CAMPOS, MELISSA
License Type: MD
Provider ID: 100334357002
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: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 100143300013
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 100143300014
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 100143300013
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 100143300014
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORNEJO PINA, RAQUEL
License Type: MD
Provider ID: 100400380001
Provider Gender: Female
License Number: A177698
NPI: 1255893368
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORNEJO PINA, RAQUEL
License Type: MD
Provider ID: 100400380001
Provider Gender: Female
License Number: A177698
NPI: 1255893368
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

DEIS, CRISTINA
License Type: MD
Provider ID: 100334223003
Provider Gender: Female
License Number: A123170
NPI: 1639478811
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

MERCY HOSPITAL CHULA VISTA
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

DEIS, CRISTINA
License Type: MD
Provider ID: 100334223003
Provider Gender: Female
License Number: A123170
NPI: 1639478811
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

DEIS, CRISTINA
License Type: MD
Provider ID: 100334223003
Provider Gender: Female
License Number: A123170
NPI: 1639478811
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

DEIS, CRISTINA
License Type: MD
Provider ID: 100334223003
Provider Gender: Female
License Number: A123170
NPI: 1639478811
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

DY, DIANE

License Type: MD

Provider ID: 100341615004

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

FAMILY PRACTICE

DY, DIANE

License Type: MD

Provider ID: 100341615004

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

FAMILY PRACTICE

ESTRADA, ALLISON

License Type: MD

Provider ID: 100397272010

Provider Gender: Female

License Number: A179598

NPI: 1467913251

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

1637 3RD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

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

Hours: M-F 8AM-5PM

FAMILY PRACTICE

ESTRADA, ALLISON

License Type: MD

Provider ID: 100397272010

Provider Gender: Female

License Number: A179598

NPI: 1467913251

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ESTRADA, ALLISON
License Type: MD
Provider ID: 100397272010
Provider Gender: Female
License Number: A179598
NPI: 1467913251
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ESTRADA, ALLISON
License Type: MD
Provider ID: 100397272010
Provider Gender: Female
License Number: A179598
NPI: 1467913251
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

FLORES, MARIBEL
License Type: MD
Provider ID: 100324269004
Provider Gender: Female
License Number: A95959
NPI: 1124104815
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

FLORES, MARIBEL

License Type: MD

Provider ID: 100324269004

Provider Gender: Female

License Number: A95959

NPI: 1124104815

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1637 3RD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

FLORES, MARIBEL

License Type: MD

Provider ID: 100324269004

Provider Gender: Female

License Number: A95959

NPI: 1124104815

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

1637 3RD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

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

FAMILY PRACTICE

FLORES, MARIBEL

License Type: MD

Provider ID: 100324269004

Provider Gender: Female

License Number: A95959

NPI: 1124104815

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

1637 3RD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

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

FAMILY PRACTICE

GARCIA, KARLA

License Type: MD

Provider ID: 100269760003

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: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

GARCIA, KARLA
License Type: MD
Provider ID: 100269760003
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

HUBLEY, PAUL
License Type: MD
Provider ID: 100041794006
Provider Gender: Male
License Number: A73172
NPI: 1568496974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

HUBLEY, PAUL
License Type: MD
Provider ID: 100041794006
Provider Gender: Male
License Number: A73172
NPI: 1568496974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

JIMENEZ, KRYSTAL
License Type: MD
Provider ID: 100359300001
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

JIMENEZ, KRYSTAL
License Type: MD
Provider ID: 100359300001
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

JOHNSON, DANIEL
License Type: DO
Provider ID: 100041777015
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM

FAMILY PRACTICE

JOHNSON, DANIEL
License Type: DO
Provider ID: 100041777015
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

LARA, LESLEY
License Type: MD
Provider ID: 100378775014
Provider Gender: Female
License Number: A173435
NPI: 1184112682
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

LARA, LESLEY
License Type: MD
Provider ID: 100378775014
Provider Gender: Female
License Number: A173435
NPI: 1184112682
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

MCKENNETT, MARIANNE
License Type: MD
Provider ID: 100088668005
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: 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: P, EB, IB, E, T, WC

C. Red de proveedores de atención primaria

FAMILY PRACTICE

MCKENNETT, MARIANNE
License Type: MD
Provider ID: 100088668005
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

MENON, POOJA
License Type: MD
Provider ID: 100351552001
Provider Gender: Female
License Number: A123263
NPI: 1053600064
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

MENON, POOJA
License Type: MD
Provider ID: 100351552001
Provider Gender: Female
License Number: A123263
NPI: 1053600064
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

MERRILL, SARAH
License Type: MD
Provider ID: 100214679007
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MERRILL, SARAH
License Type: MD
Provider ID: 100214679007
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MINNICH, AUDRIE
License Type: MD
Provider ID: 100470479001
Provider Gender: Female
License Number: A190024
NPI: 1013659184
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

MINNICH, AUDRIE
License Type: MD
Provider ID: 100470479001
Provider Gender: Female
License Number: A190024
NPI: 1013659184
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 100099596007
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

C. Red de proveedores de atención primaria

MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 100099596007
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

NGUYEN, CARIE
License Type: MD
Provider ID: 100099766004
Provider Gender: Female
License Number: A106103
NPI: 1174781132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM

FAMILY PRACTICE

NGUYEN, CARIE
License Type: MD
Provider ID: 100099766004
Provider Gender: Female
License Number: A106103
NPI: 1174781132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, T,

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

NGUYEN, LINH
License Type: MD
Provider ID: 100337553002
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NGUYEN, LINH
License Type: MD
Provider ID: 100337553002
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OROZCO, KATHILEEN
License Type: DO
Provider ID: 100414018026
Provider Gender: Female
License Number: 20A21632
NPI: 1871122473
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OROZCO, KATHILEEN
License Type: DO
Provider ID: 100414018026
Provider Gender: Female
License Number: 20A21632
NPI: 1871122473
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OROZCO, KATHILEEN
License Type: DO
Provider ID: 100414018026
Provider Gender: Female
License Number: 20A21632
NPI: 1871122473
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OROZCO, KATHILEEN
License Type: DO
Provider ID: 100414018026
Provider Gender: Female
License Number: 20A21632
NPI: 1871122473
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PALOMINO, MARY
License Type: MD
Provider ID: 100249271003
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PALOMINO, MARY
License Type: MD
Provider ID: 100249271003
Provider Gender: Female
License Number: A115699

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1770718975
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PEDROTTY, JOHN
License Type: MD
Provider ID: 100049619008
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

PEDROTTY, JOHN
License Type: MD
Provider ID: 100049619008
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 100337666044
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

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: P, EB, IB, E, T, WC

C. Red de proveedores de atención primaria

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 100337666044
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PIEROS, JANELLE
License Type: DO
Provider ID: 100220799005
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PIEROS, JANELLE
License Type: DO
Provider ID: 100220799005
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PISINGER, PATRICIA
License Type: MD
Provider ID: 100057871006
Provider Gender: Female
License Number: A69264
NPI: 1861428302
Provider English Spoken: Y
Provider Language(s) Spoken: Czech

C. Red de proveedores de atención primaria

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

PISINGER, PATRICIA
License Type: MD
Provider ID: 100057871006
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

RAHMAN, AKBAR
License Type: MD
Provider ID: 100152302013
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

RAHMAN, AKBAR
License Type: MD
Provider ID: 100152302013
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: 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):

C. Red de proveedores de atención primaria

N

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

FAMILY PRACTICE

ROJAS, SARAH

License Type: MD

Provider ID: 100351568018

Provider Gender: Female

License Number: A139169

NPI: 1245645076

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, T, WC

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

FAMILY PRACTICE

ROJAS, SARAH

License Type: MD

Provider ID: 100351568018

Provider Gender: Female

License Number: A139169

NPI: 1245645076

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, T, WC

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

FAMILY PRACTICE

ROSENBLATT, EUGENE

License Type: DO

Provider ID: 100333891002

Provider Gender: Male

License Number: 20A9060

NPI: 1427123991

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

FAMILY PRACTICE

ROSENBLATT, EUGENE

License Type: DO

Provider ID: 100333891002

Provider Gender: Male

License Number: 20A9060

NPI: 1427123991

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

SERPAS, SHAILA

License Type: MD

Provider ID: 100017357005

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: 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: P, EB, IB, E, T, WC

Hours: M-F 8AM-5PM

FAMILY PRACTICE

SERPAS, SHAILA

License Type: MD

Provider ID: 100017357005

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: 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: P, EB, IB, E, T, WC

Hours: M-F 8AM-5PM

FAMILY PRACTICE

SPAK, DARYL

License Type: MD

Provider ID: 100438914007

Provider Gender: Male

License Number: A166843

NPI: 1285128025

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL

Board Certified: No

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: P, EB, IB, E, T, WC

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

FAMILY PRACTICE

SPAK, DARYL

License Type: MD

Provider ID: 100438914007

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider Gender: Male
License Number: A166843
NPI: 1285128025
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified: No
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 100097829008
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 100097829008
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 100334847003
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 100334847003
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

TOLEDO-NADER, CAROLL
License Type: MD
Provider ID: 100106153013
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

TOLEDO-NADER, CAROLL
License Type: MD
Provider ID: 100106153013
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

TREJO, RAUL
License Type: MD
Provider ID: 100088864005

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

TREJO, RAUL
License Type: MD
Provider ID: 100088864005
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 100189428014
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 100189428014
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: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)

C. Red de proveedores de atención primaria

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC

FAMILY PRACTICE

VELASQUEZ, GABRIELA
License Type: MD
Provider ID: 100443888010
Provider Gender: Female
License Number: A193933
NPI: 1811513617
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

VELASQUEZ, GABRIELA
License Type: MD
Provider ID: 100443888010
Provider Gender: Female
License Number: A193933
NPI: 1811513617
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

VELASQUEZ, GABRIELA
License Type: MD
Provider ID: 100443888010
Provider Gender: Female
License Number: A193933
NPI: 1811513617
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

VELASQUEZ, GABRIELA
License Type: MD
Provider ID: 100443888010
Provider Gender: Female
License Number: A193933
NPI: 1811513617
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WEN, AKI
License Type: DO
Provider ID: 100229198008
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WEN, AKI
License Type: DO
Provider ID: 100229198008
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WHITLEY, NICHOLAS
License Type: MD
Provider ID: 100197848003
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

WHITLEY, NICHOLAS
License Type: MD
Provider ID: 100197848003
Provider Gender: Male

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

YOON, RYAN
License Type: MD
Provider ID: 100217790021
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: 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: P, EB, IB, E, T, WC

FAMILY PRACTICE

YOON, RYAN
License Type: MD
Provider ID: 100217790021
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: 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: P, EB, IB, E, T, WC

FQHC

CHULA VISTA FAMILY HLTH CTR,
Provider ID: PG0025044018
NPI: 1346480837
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: PG0025044018

NPI: 1346480837

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: PG0082946002

NPI: 1083959464

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619) 515-2325

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: PG0082946002

NPI: 1083959464

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619) 515-2325

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: PG0047560010

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: P, EB, IB, E, T, WC

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

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: PG0047560010

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM

FQHC

SAN YSIDRO HEALTH OTAY,
Provider ID: PG0068380004
NPI: 1922051812
Provider English Spoken: Y
Cultural Competency: N
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH OTAY,
Provider ID: PG0068380004
NPI: 1922051812
Provider English Spoken: Y
Cultural Competency: N
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH OTAY,
Provider ID: PG0047542007
NPI: 1922051812
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH OTAY,
Provider ID: PG0047542007
NPI: 1922051812
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 205-1376
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

BAY PEDIATRICS,
Provider ID: PG0127835003
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,
Provider ID: PG0127835003
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: WC
Hours: M-F 8AM-5PM

GENERAL PRACTICE

SAMI, REMAN
License Type: DO
Provider ID: 100397413003
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

GENERAL PRACTICE

SAMI, REMAN
License Type: DO
Provider ID: 100397413003
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO
License Type: MD
Provider ID: 100419155009
Provider Gender: Male
License Number: A188075
NPI: 1649808460
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO
License Type: MD
Provider ID: 100419155009
Provider Gender: Male
License Number: A188075
NPI: 1649808460
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

INTERNAL MEDICINE

CHEN, TSUH-YIN
License Type: MD
Provider ID: 100187934010
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: 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: P, EB, IB, E, T, WC

INTERNAL MEDICINE

CHEN, TSUH-YIN
License Type: MD
Provider ID: 100187934010
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: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)

C. Red de proveedores de atención primaria

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC

INTERNAL MEDICINE

HURST, MICHAEL
License Type: DO
Provider ID: 100033198024
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: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

HURST, MICHAEL
License Type: DO
Provider ID: 100033198024
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: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

HURST, MICHAEL
License Type: DO
Provider ID: 100033198024
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: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

C. Red de proveedores de atención primaria

HURST, MICHAEL
License Type: DO
Provider ID: 100033198024
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: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA DELCARMEN
License Type: MD
Provider ID: 100247743026
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: 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: P, EB, IB, E, T, WC

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA DELCARMEN
License Type: MD
Provider ID: 100247743026
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208005
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,

C. Red de proveedores de atención primaria

SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311002
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311002
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484002
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: 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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 100395484002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD
Provider ID: 100387235002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD
Provider ID: 100387235002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 100334432004
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y

C. Red de proveedores de atención primaria

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 100090097007
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 100090097007
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 100088886059
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 100088886059
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

SHORT, ABIADE
License Type: MD
Provider ID: 100140962013
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: 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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SHORT, ABIADE
License Type: MD
Provider ID: 100140962013
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: No

C. Red de proveedores de atención primaria

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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023006
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023006
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
License Type: DO
Provider ID: 100087298020
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

C. Red de proveedores de atención primaria

License Type: DO
Provider ID: 100087298020
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: 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: P, EB, IB, E, T, WC

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195011
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195011
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

PEDIATRICS

BROUDY, ABRAHAM
License Type: MD
Provider ID: 100113261008

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

CAPETANAKIS, ELENI
License Type: MD
Provider ID: 100093171006
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

CORDOBA, MIGUEL
License Type: MD
Provider ID: 100091678006
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

PEDIATRICS

DI FRANCO, MATTHEW
License Type: MD
Provider ID: 100090030008
Provider Gender: Male
License Number: G58994
NPI: 1841343548
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

DI FRANCO, MATTHEW
License Type: MD
Provider ID: 100090030008
Provider Gender: Male
License Number: G58994
NPI: 1841343548
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

DI FRANCO, MATTHEW
License Type: MD
Provider ID: 100090030008
Provider Gender: Male
License Number: G58994
NPI: 1841343548
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

DI FRANCO, MATTHEW
License Type: MD
Provider ID: 100090030008
Provider Gender: Male
License Number: G58994
NPI: 1841343548
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

DONG, TAMMY
License Type: MD
Provider ID: 100037399004
Provider Gender: Female
License Number: A66903
NPI: 1386655413
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

PEDIATRICS

DONG, TAMMY
License Type: MD
Provider ID: 100037399004
Provider Gender: Female
License Number: A66903
NPI: 1386655413
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, T, WC

PEDIATRICS

DORINGO, ELAINIE
License Type: MD
Provider ID: 100089996017
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: No
RADY CHILDRENS HEALTH NETWORK
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

FLETCHER, EMILY
License Type: MD
Provider ID: 100214862009
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

FLORES, ERNEST
License Type: MD
Provider ID: 100421594003
Provider Gender: Male
NPI: 1043848807
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

FRESNO, BLANCA
License Type: MD
Provider ID: 100106150022
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

PEDIATRICS

GARCIA, RAFAEL
License Type: MD
Provider ID: 100088427011
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 100162078016
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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 100162078017
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 100162078017
Provider Gender: Female
License Number: C51110
NPI: 1508904657

C. Red de proveedores de atención primaria

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

PEDIATRICS

HOLLICK, NATALIE
License Type: DO
Provider ID: 100351143004
Provider Gender: Female
NPI: 1558716845
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

ISAIAS, AGNELA
License Type: MD
Provider ID: 100106332017
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: 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: WC

PEDIATRICS

ISAIAS, AGNELA
License Type: MD
Provider ID: 100106332017
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: No
IHP OF SOUTHERN CAL-PHP
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC

PEDIATRICS

JACOBS-KLEISLI, MILAGROS
License Type: DO
Provider ID: 100169135015
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 100053947016
Provider Gender: Male
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 100053947017
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 100053947017
Provider Gender: Male

C. Red de proveedores de atención primaria

License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

MISTRY, CHETAN
License Type: MD
Provider ID: 100089946011
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, TRUC
License Type: MD
Provider ID: 100081860007
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

OIRA, VICTORIA
License Type: MD
Provider ID: 100076402008
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: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

PEDIATRICS

PIANSAY, MARIA CORAZON
License Type: MD
Provider ID: 100242807025
Provider Gender: Female
License Number: A93785
NPI: 1669680351
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

PIANSAY, MARIA CORAZON
License Type: MD
Provider ID: 100242807025
Provider Gender: Female
License Number: A93785
NPI: 1669680351
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

PIANSAY, MARIA CORAZON
License Type: MD
Provider ID: 100242807025
Provider Gender: Female
License Number: A93785
NPI: 1669680351
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

PIANSAY, MARIA CORAZON
License Type: MD
Provider ID: 100242807025
Provider Gender: Female
License Number: A93785
NPI: 1669680351
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

PEDIATRICS

ROWHANI, NAGHMEH
License Type: MD
Provider ID: 100139347007
Provider Gender: Female
License Number: A92037
NPI: 1992876759
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

ROWHANI, NAGHMEH
License Type: MD
Provider ID: 100139347007
Provider Gender: Female
License Number: A92037
NPI: 1992876759
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

ROWHANI, NAGHMEH
License Type: MD
Provider ID: 100139347010
Provider Gender: Female
NPI: 1992876759
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100

C. Red de proveedores de atención primaria

Fax: (619) 426-2170
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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

SALAZAR, JUANITA
License Type: MD
Provider ID: 100108238006
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

PEDIATRICS

SALAZAR, JUANITA
License Type: MD
Provider ID: 100108238006
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

PEDIATRICS

SANTIAGO, ROXANE
License Type: MD
Provider ID: 100217470008
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

SHETH, HASMUKH
License Type: MD
Provider ID: 100086748011
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: 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: P, EB, IB, E, T, WC

PEDIATRICS

SHETH, HASMUKH
License Type: MD
Provider ID: 100086748011
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: 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: P, EB, IB, E, T, WC

PEDIATRICS

VALENCIA, MARILES
License Type: MD
Provider ID: 100107858021
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: 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): WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

N
Accessibility: EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

YAO, CATHERINE
License Type: MD
Provider ID: 100321615004
Provider Gender: Female
NPI: 1801166442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

ZARGAR, SHABNAM
License Type: MD
Provider ID: 100240486006
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: 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: WC
Hours: M-F 8AM-5PM

EL CAJON

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 100334811002
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 100334811002
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA
License Type: NP
Provider ID: 100333807001
Provider Gender: Female
License Number: NP6782
NPI: 1548292626
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA
License Type: NP
Provider ID: 100333807001
Provider Gender: Female
License Number: NP6782
NPI: 1548292626
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 100246139004
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139004

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC*
- *Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139004

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC*
- *Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139004

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC*
- *Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

CERTIFIED NURSE PRACTITIONER

SWAN, MELANIE

License Type: NP

Provider ID: 100334805001

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

SWAN, MELANIE
License Type: NP
Provider ID: 100334805001
Provider Gender: Female
License Number: NP95000818
NPI: 1871934414
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN
License Type: MD
Provider ID: 100333907001
Provider Gender: Female
License Number: A144974
NPI: 1275948473
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN
License Type: MD
Provider ID: 100333907001
Provider Gender: Female
License Number: A144974
NPI: 1275948473
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R,

C. Red de proveedores de atención primaria

WC

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

FAMILY PRACTICE

ALGHAMDI, ASMA

License Type: MD

Provider ID: 100359014015

Provider Gender: Female

License Number: A167529

NPI: 1316310840

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

FAMILY PRACTICE

ALGHAMDI, ASMA

License Type: MD

Provider ID: 100359014015

Provider Gender: Female

License Number: A167529

NPI: 1316310840

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

FAMILY PRACTICE

BAIN, NATALIE

License Type: MD

Provider ID: 100430314002

Provider Gender: Female

License Number: A183464

NPI: 1821677584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC

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

FAMILY PRACTICE

BAIN, NATALIE

License Type: MD

Provider ID: 100430314002

Provider Gender: Female

License Number: A183464

NPI: 1821677584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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

C. Red de proveedores de atención primaria

Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON
License Type: MD
Provider ID: 100332143006
Provider Gender: Male
License Number: A148499
NPI: 1013399559
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON
License Type: MD
Provider ID: 100332143006
Provider Gender: Male
License Number: A148499
NPI: 1013399559
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA
License Type: MD
Provider ID: 100417728001
Provider Gender: Male
License Number: A186694
NPI: 1447888284
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA
License Type: MD
Provider ID: 100417728001
Provider Gender: Male
License Number: A186694
NPI: 1447888284
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL
License Type: DO
Provider ID: 100334102003
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL
License Type: DO
Provider ID: 100334102003
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

DOMINGUEZ, DENNIS
License Type: MD
Provider ID: 100085221025
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: 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

C. Red de proveedores de atención primaria

Accessibility: WC

FAMILY PRACTICE

DOMINGUEZ, DENNIS

License Type: MD
Provider ID: 100085221025
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: 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: WC

FAMILY PRACTICE

GORDON, CHRISTOPHER

License Type: MD
Provider ID: 100334791003
Provider Gender: Male
License Number: A83390
NPI: 1477711521
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

GORDON, CHRISTOPHER

License Type: MD
Provider ID: 100334791003
Provider Gender: Male
License Number: A83390
NPI: 1477711521
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

HASTANAN, CAROL

License Type: MD
Provider ID: 100323314001
Provider Gender: Female
License Number: A110192
NPI: 1861648461
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, WC, ME

FAMILY PRACTICE

HASTANAN, CAROL
License Type: MD
Provider ID: 100323314001
Provider Gender: Female
License Number: A110192
NPI: 1861648461
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME

FAMILY PRACTICE

HODGKIN, EDWARD
License Type: MD
Provider ID: 100430174001
Provider Gender: Male
License Number: A177445
NPI: 1922619766
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

HODGKIN, EDWARD
License Type: MD
Provider ID: 100430174001
Provider Gender: Male
License Number: A177445
NPI: 1922619766
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 100344918002
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

C. Red de proveedores de atención primaria

Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 100344918002
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

NASSIR, BASSAM
License Type: MD
Provider ID: 100159191016
Provider Gender: Male
License Number: A101888
NPI: 1386848166
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NASSIR, BASSAM
License Type: MD
Provider ID: 100159191016
Provider Gender: Male
License Number: A101888
NPI: 1386848166
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

C. Red de proveedores de atención primaria

NIAZI, HARRIS
License Type: MD
Provider ID: 100334378001
Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

NIAZI, HARRIS
License Type: MD
Provider ID: 100334378001
Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

PUTRUS, RAMIZ
License Type: MD
Provider ID: 100348831006
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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

FAMILY PRACTICE

PUTRUS, RAMIZ
License Type: MD
Provider ID: 100348831005
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

PUTRUS, RAMIZ
License Type: MD
Provider ID: 100348831006
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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

FAMILY PRACTICE

PUTRUS, RAMIZ
License Type: MD
Provider ID: 100348831005
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

SALEM, RAMSEY
License Type: MD
Provider ID: 100360207008
Provider Gender: Male
License Number: A158364
NPI: 1245401298
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

SALEM, RAMSEY
License Type: MD
Provider ID: 100360207008
Provider Gender: Male
License Number: A158364
NPI: 1245401298
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

C. Red de proveedores de atención primaria

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 100052890007

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

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

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC*

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 100052890024

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

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

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8:30AM-5:30PM*

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 100052890024

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

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

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8:30AM-5:30PM*

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 100052890007

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

- *Phone: (619) 312-0347*
- *After Hours Phone: (619) 312-0347*

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,
Provider ID: PG0025044024
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: EB, IB, E, R, ME

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,
Provider ID: PG0025044024
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: EB, IB, E, R, ME

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,
Provider ID: PG0084245002
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: EB, IB, E, R, ME

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,
Provider ID: PG0084245002
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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,
Provider ID: PG0084245002
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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FQHC

C. Red de proveedores de atención primaria

LA MAESTRA CHC EL CAJON BROADWAY,
Provider ID: PG0085229002
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: WC
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,
Provider ID: PG0085229002
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: WC
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,
Provider ID: PG0129902003
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
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,
Provider ID: PG0129902003
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
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: PG0010344010
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.or

FQHC

LA MAESTRA CHC-REA AVE,

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: PG0010344010
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5PM

FQHC

SAN YSIDRO HEALTH EL CAJON,
Provider ID: PG0111464003
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH EL CAJON,
Provider ID: PG0111464003
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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

ALWASH, MUSTAFA
License Type: MD
Provider ID: 100350371003
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

ALWASH, MUSTAFA
License Type: MD
Provider ID: 100350371003
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

AWDISHO, ALAN
License Type: DO
Provider ID: 100381973005
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: 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: WC

INTERNAL MEDICINE

AWDISHO, ALAN
License Type: DO
Provider ID: 100381973005
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: 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: WC

INTERNAL MEDICINE

CARPENTER III, ROBERT
License Type: DO
Provider ID: 100323696015
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

C. Red de proveedores de atención primaria

Board Certified: 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: WC

INTERNAL MEDICINE

CARPENTER III, ROBERT
License Type: DO
Provider ID: 100323696015
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC

INTERNAL MEDICINE

DUONG, MAI
License Type: MD
Provider ID: 100334595002
Provider Gender: Female
License Number: A127798
NPI: 1629339304
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

DUONG, MAI
License Type: MD
Provider ID: 100334595002
Provider Gender: Female
License Number: A127798
NPI: 1629339304
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA
License Type: MD
Provider ID: 100334849002
Provider Gender: Female
License Number: A138815

C. Red de proveedores de atención primaria

NPI: 1285079509
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA
License Type: MD
Provider ID: 100334849002
Provider Gender: Female
License Number: A138815
NPI: 1285079509
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN
License Type: MD
Provider ID: 100357195006
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, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN
License Type: MD
Provider ID: 100357195006
Provider Gender: Male
License Number: A160760
NPI: 1891159620
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

MALINAK, JAMES
License Type: MD
Provider ID: 100031498014
Provider Gender: Male
License Number: G52238
NPI: 1497867501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MALINAK, JAMES
License Type: MD
Provider ID: 100031498014
Provider Gender: Male
License Number: G52238
NPI: 1497867501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MANSY, TAMARA
License Type: MD
Provider ID: 100363067007
Provider Gender: Female
License Number: A164238
NPI: 1396277737
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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

C. Red de proveedores de atención primaria

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

INTERNAL MEDICINE

MANSY, TAMARA
License Type: MD
Provider ID: 100363067007
Provider Gender: Female
License Number: A164238
NPI: 1396277737
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 100325305011
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: 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: WC

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 100325305011
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: 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: WC

INTERNAL MEDICINE

MICHAEL, RAMI
License Type: MD
Provider ID: 100341876015
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: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MICHAEL, RAMI
License Type: MD
Provider ID: 100341876015
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: 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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

NADI, FAHIMA
License Type: MD
Provider ID: 100395475001
Provider Gender: Female
License Number: A175325
NPI: 1770072290
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Pashto, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

NADI, FAHIMA
License Type: MD
Provider ID: 100395475001
Provider Gender: Female
License Number: A175325
NPI: 1770072290
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Pashto, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

NARAYAN, ARCHANA
License Type: MD
Provider ID: 100186600015

C. Red de proveedores de atención primaria

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

INTERNAL MEDICINE

NARAYAN, ARCHANA
License Type: MD
Provider ID: 100186600015
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: 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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 100344664008
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 100344664008
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: No
FAMILY HEALTH CENTERS OF

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

REDDY, ARJUN
License Type: MD
Provider ID: 100050929005
Provider Gender: Male
NPI: 1730132457
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
COMMUNITY CARE IPA LLC
5442 SYCUAN RD
EL CAJON, CA 92019
Phone: (619) 445-0707
Fax: (619) 445-0988
After Hours Phone: (619) 445-0707
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-4PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050017
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050017
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: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619) 795-5983

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050002
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: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 269-1262
After Hours Phone: (619) 269-1262

Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-TU 8AM-5PM TH-F 8AM-5PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050002
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: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 269-1262
After Hours Phone: (619) 269-1262

Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-TU 8AM-5PM TH-F 8AM-5PM

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA
License Type: MD
Provider ID: 100338872006
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: 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):

C. Red de proveedores de atención primaria

N
Accessibility: WC

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA
License Type: MD
Provider ID: 100338872006
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: 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: WC

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON
License Type: MD
Provider ID: 100353414009
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: 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: WC

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON
License Type: MD
Provider ID: 100353414009
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: 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: WC

INTERNAL MEDICINE

YOON, TAE HYUN
License Type: MD
Provider ID: 100349644002
Provider Gender: Male
License Number: C161090
NPI: 1508918178
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

INTERNAL MEDICINE

YOON, TAE HYUN
License Type: MD
Provider ID: 100349644002
Provider Gender: Male
License Number: C161090
NPI: 1508918178
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208012
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208012
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311009
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

C. Red de proveedores de atención primaria

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311009
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235009
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA
License Type: MD
Provider ID: 100091857007
Provider Gender: Female
License Number: G50634
NPI: 1285687350
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA
License Type: MD
Provider ID: 100091857007
Provider Gender: Female
License Number: G50634
NPI: 1285687350
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified: 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

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 100090097015
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: No

C. Red de proveedores de atención primaria

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

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 100090097015
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: 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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343009
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343009
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023013
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023013
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195015
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: 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

C. Red de proveedores de atención primaria

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

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD

Provider ID: 100040195015

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: 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: P, EB, IB, E, R, WC

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

PEDIATRICS

ADJAN, ROULA

License Type: MD

Provider ID: 100156045005

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, French, Spanish

Cultural Competency: N

Board Certified: 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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PEDIATRICS

ADJAN, ROULA

License Type: MD

Provider ID: 100156045005

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, French, Spanish

Cultural Competency: N

Board Certified: 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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PEDIATRICS

ALWAHAB, AREEJ

License Type: MD

Provider ID: 100379364005

Provider Gender: Female

NPI: 1497138002

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462006
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462009
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462006
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

C. Red de proveedores de atención primaria

VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462009
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

FLEMING, TARA
License Type: MD
Provider ID: 100359922001
Provider Gender: Female
License Number: A152462
NPI: 1972965242
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

PEDIATRICS

FLEMING, TARA
License Type: MD
Provider ID: 100359922001
Provider Gender: Female
License Number: A152462
NPI: 1972965242
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

American Sign Language (ASL): N

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

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

PEDIATRICS

JACKSON, DANA

License Type: DO

Provider ID: 100335546018

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: 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: P, EB, IB, E, R, WC

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

PEDIATRICS

JACKSON, DANA

License Type: DO

Provider ID: 100335546018

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: 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: P, EB, IB, E, R, WC

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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 100145401016

Provider Gender: Female

License Number: A110010

NPI: 1033441316

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

N

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

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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 100145401009

Provider Gender: Female

License Number: A110010

NPI: 1033441316

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: 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: P, EB, IB, E, R, T, WC

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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 100145401016

Provider Gender: Female

License Number: A110010

NPI: 1033441316

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: 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: P, EB, IB, E, R, T, WC

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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 100145401009

Provider Gender: Female

License Number: A110010

NPI: 1033441316

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: 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: P, EB, IB, E, R, T, WC

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

PEDIATRICS

KODSI, ALICIA

License Type: MD

Provider ID: 100334748001

Provider Gender: Female

License Number: A147976

NPI: 1932514353

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PEDIATRICS

KODSI, ALICIA
License Type: MD
Provider ID: 100334748001
Provider Gender: Female
License Number: A147976
NPI: 1932514353
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PEDIATRICS

NAGNUR, PRITI
License Type: MD
Provider ID: 100378275001
Provider Gender: Female
License Number: A170055
NPI: 1316289929
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME

PEDIATRICS

NAGNUR, PRITI
License Type: MD
Provider ID: 100378275001
Provider Gender: Female
License Number: A170055
NPI: 1316289929
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC, ME

PEDIATRICS

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NAIK, SHILPA
License Type: MD
Provider ID: 100227692016
Provider Gender: Female
NPI: 1902156904
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, Sharp Grossmont Hospital
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, VI
License Type: MD
Provider ID: 100311772009
Provider Gender: Female
NPI: 1053540534
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5PM

PEDIATRICS

PINTO, ANITA
License Type: MD
Provider ID: 100042394012
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: 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: EB, IB, E
Hours: M-F 8AM-5PM

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 100354595004
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 100354595004
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: 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: WC
Hours: M-F 8AM-5PM

ENCINITAS

FAMILY PRACTICE

SHAH, NIYATI
License Type: MD
Provider ID: 100443786006
Provider Gender: Female
License Number: C193352
NPI: 1891136354
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
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: WC
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM

FAMILY PRACTICE

SHAH, NIYATI
License Type: MD
Provider ID: 100443786006
Provider Gender: Female
License Number: C193352
NPI: 1891136354
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
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: WC
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FQHC

TRUECARE,
Provider ID: PG0092584008
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
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
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM

FQHC

TRUECARE,
Provider ID: PG0092584008
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
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
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM

PEDIATRICS

BRION, SONJA
License Type: MD
Provider ID: 100085034007
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: 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\18
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

PEDIATRICS

MENDENHALL, ANNA
License Type: MD
Provider ID: 100031153009
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: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

N
Accessibility: WC
Hours: M-F 8AM-5PM

PEDIATRICS

MURPHY, CARMEL
License Type: MD
Provider ID: 100082627019
Provider Gender: Female
License Number: A103940
NPI: 1790824787
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: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

PEDIATRICS

MURPHY, CARMEL
License Type: MD
Provider ID: 100082627019
Provider Gender: Female
License Number: A103940
NPI: 1790824787
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: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

PEDIATRICS

TERRY, AMANDA
License Type: MD
Provider ID: 100194394012
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

TOLBA, KAMEI
License Type: MD
Provider ID: 100020025012
Provider Gender: Male
NPI: 1144221763
Provider English Spoken: Y

C. Red de proveedores de atención primaria

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

ESCONDIDO

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 100214881014
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: 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

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 100214881014
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: 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

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 100351214005
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, WC

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

CASTANER, ZALYA

License Type: MD
Provider ID: 100351214002
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

CASTANER, ZALYA

License Type: MD
Provider ID: 100351214005
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

CASTANER, ZALYA

License Type: MD
Provider ID: 100351214002
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

COBIAN, VANESSA

License Type: MD
Provider ID: 100350271004
Provider Gender: Female
License Number: A145349
NPI: 1134513039
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N

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

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

FAMILY PRACTICE

COBIAN, VANESSA

License Type: MD

Provider ID: 100350271004

Provider Gender: Female

License Number: A145349

NPI: 1134513039

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC

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

FAMILY PRACTICE

COX, VICTORIA

License Type: MD

Provider ID: 100374049003

Provider Gender: Female

License Number: C171064

NPI: 1093087819

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

FAMILY PRACTICE

COX, VICTORIA

License Type: MD

Provider ID: 100374049003

Provider Gender: Female

License Number: C171064

NPI: 1093087819

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

FAMILY PRACTICE

FERRAIOLO, NATALIE

License Type: MD

Provider ID: 100350855024

Provider Gender: Female

License Number: A152372

NPI: 1306290143

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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

FAMILY PRACTICE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 100350855024
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 100333820003
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 100333820003
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

FAMILY PRACTICE

KAUR, JATINDER
License Type: MD
Provider ID: 100315025011
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

KAUR, JATINDER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100315025011
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

MCHENRY, KATHRYN
License Type: DO
Provider ID: 100320650006
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

MCHENRY, KATHRYN
License Type: DO
Provider ID: 100320650006
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

NAKAMURA, MELANIE
License Type: MD
Provider ID: 100195029003
Provider Gender: Female
License Number: A107557
NPI: 1104022672
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R,

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

FAMILY PRACTICE

NAKAMURA, MELANIE
License Type: MD
Provider ID: 100195029003
Provider Gender: Female
License Number: A107557
NPI: 1104022672
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

ORTIZ, KENNETH
License Type: MD
Provider ID: 100335275037
Provider Gender: Male
License Number: A156607
NPI: 1356761571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 745-5832
After Hours Phone: (760) 745-5832
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

FAMILY PRACTICE

ORTIZ, KENNETH
License Type: MD
Provider ID: 100335275037
Provider Gender: Male
License Number: A156607
NPI: 1356761571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 745-5832
After Hours Phone: (760) 745-5832
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

FAMILY PRACTICE

PATEL, JITENBHAI
License Type: MD
Provider ID: 100339325002
Provider Gender: Male
License Number: A94128
NPI: 1902921406
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R,

T, WC

FAMILY PRACTICE

PATEL, JITENBHAI

License Type: MD

Provider ID: 100339325003

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC

FAMILY PRACTICE

PATEL, JITENBHAI

License Type: MD

Provider ID: 100339325003

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, WC

FAMILY PRACTICE

PATEL, JITENBHAI

License Type: MD

Provider ID: 100339325002

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

RAO, USHA

License Type: MD

Provider ID: 100381993009

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: 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

FAMILY PRACTICE

RAO, USHA

License Type: MD

C. Red de proveedores de atención primaria

Provider ID: 100381993009
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: 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

FAMILY PRACTICE

SANDHU, BASANT
License Type: MD
Provider ID: 100315195012
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: 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: P, EB, IB, E, R, WC
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

SANDHU, BASANT
License Type: MD
Provider ID: 100315195012
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: 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: P, EB, IB, E, R, WC
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

SIVA, TENAYA
License Type: MD
Provider ID: 100418703007
Provider Gender: Male
License Number: A185064
NPI: 1174151203
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 745-5832
After Hours Phone: (760) 745-5832
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

FAMILY PRACTICE

SIVA, TENAYA
License Type: MD
Provider ID: 100418703007
Provider Gender: Male
License Number: A185064
NPI: 1174151203
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 745-5832
After Hours Phone: (760) 745-5832
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

FQHC

ESCONDIDO FAMILY HEALTH CENTER,
Provider ID: PG0125224003
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

FQHC

ESCONDIDO FAMILY HEALTH CENTER,
Provider ID: PG0125224003
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

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,
Provider ID: PG0024990059
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: WC
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,
Provider ID: PG0024990059
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

C. Red de proveedores de atención primaria

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,
Provider ID: PG0087195005
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
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,
Provider ID: PG0087195005
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
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,
Provider ID: PG0024990057
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: WC
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,
Provider ID: PG0024990057
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: WC
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,
Provider ID: PG0024990053
NPI: 1720264641
Provider English Spoken: Y

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, WC
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,
Provider ID: PG0024990053
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: P, EB, IB, E, R, WC
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,
Provider ID: PG0094132002
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
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,
Provider ID: PG0094132002
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
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

AGUERO, AMETHYST
License Type: DO
Provider ID: 100398103002
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
128 N BROADWAY
ESCONDIDO, CA 92025

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

INTERNAL MEDICINE

AGUERO, AMETHYST
License Type: DO
Provider ID: 100398103002
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

INTERNAL MEDICINE

CARRERA, JORGE
License Type: MD
Provider ID: 100075629012
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: 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

INTERNAL MEDICINE

CARRERA, JORGE
License Type: MD
Provider ID: 100075629012
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: 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

INTERNAL MEDICINE

VETTICADEN, SANTOSH
License Type: MD
Provider ID: 100368170001
Provider Gender: Male
License Number: C53062
NPI: 1679102461
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH
License Type: MD
Provider ID: 100368170001
Provider Gender: Male
License Number: C53062
NPI: 1679102461
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 100334303006
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 100334303009
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 100334303009
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: WC

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 100334303006
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T

PEDIATRICS

ALDANA, NANCY
License Type: MD
Provider ID: 100079966007
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: 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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM

PEDIATRICS

ALDANA, NANCY
License Type: MD
Provider ID: 100079966007
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: 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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM

PEDIATRICS

C. Red de proveedores de atención primaria

CHOW, BYRON
License Type: MD
Provider ID: 100011079003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

CHOW, BYRON
License Type: MD
Provider ID: 100011079003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

COHEN, CARA
License Type: MD
Provider ID: 100062199011
Provider Gender: Female
NPI: 1215021274
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

COULLAHAN, JESSICA
License Type: MD
Provider ID: 100106293010
Provider Gender: Female
NPI: 1750579108
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL

C. Red de proveedores de atención primaria

CENTER
Board Certified: 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
Hours: M-F 8AM-5PM SA 8:30AM-12PM

PEDIATRICS

CURET, ZULMA
License Type: MD
Provider ID: 100246070010
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

CURET, ZULMA
License Type: MD
Provider ID: 100246070010
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

DOSHI, NEELIMA
License Type: MD
Provider ID: 100050924014
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: 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: P, EB, IB, E, R,

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

T

PEDIATRICS

DOSHI, NEELIMA
License Type: MD
Provider ID: 100050924014
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: 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: P, EB, IB, E, R, T

PEDIATRICS

SONG, JOYCE
License Type: DO
Provider ID: 100396898009
Provider Gender: Female
NPI: 1417510694
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

STRAZICICH, KARLA
License Type: MD
Provider ID: 100080501005
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

STRAZICICH, KARLA
License Type: MD
Provider ID: 100080501005
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: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025

C. Red de proveedores de atención primaria

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

PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA
License Type: MD
Provider ID: 100103741010
Provider Gender: Female
License Number: G83438
NPI: 1730288747
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T

PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA
License Type: MD
Provider ID: 100103741010
Provider Gender: Female
License Number: G83438
NPI: 1730288747
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T

FALLBROOK

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844

C. Red de proveedores de atención primaria

NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 100358241006
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: 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: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747012
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
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: WC

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747012
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
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: WC

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747012
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 631-5000

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: WC

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747012
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
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: WC

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747012
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
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: WC

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747012
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
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: WC

FQHC

FALLBROOK FAMILY HLTH CTR,
Provider ID: PG0009519021
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
Accessibility: EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

SA 8AM-5PM

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: PG0009519021

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

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

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

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409012

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: WC

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

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409012

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: WC

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

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409012

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409012

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409012
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: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409012
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE
License Type: MD
Provider ID: 100052695010
Provider Gender: Male
License Number: G37412
NPI: 1538234190
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE
License Type: MD
Provider ID: 100052695010
Provider Gender: Male
License Number: G37412
NPI: 1538234190
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N
Accessibility: EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

PEDIATRICS

DEL RE, AMANDA
License Type: MD
Provider ID: 100219945023
Provider Gender: Female
NPI: 1548499957
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

ROBINSON, DAISY
License Type: MD
Provider ID: 100052395008
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: No
RADY CHILDRENS HEALTH NETWORK
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-4PM

PEDIATRICS

VU, WENDY
License Type: MD
Provider ID: 100363537003
Provider Gender: Female
License Number: A169529
NPI: 1508148370
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, T, WC
Hours: M-F 8AM-7:30PM SA 8AM-5PM

PEDIATRICS

VU, WENDY
License Type: MD
Provider ID: 100363537003
Provider Gender: Female
License Number: A169529
NPI: 1508148370
Provider English Spoken: Y
Cultural Competency: N

Board Certified: 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: EB, IB, E, R, T, WC
Hours: M-F 8AM-7:30PM
SA 8AM-5PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL
License Type: DO
Provider ID: 100041777002
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: 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: P, EB, E, R, WC
Hours: M-TH 8:30AM-9PM
F 8:30AM-5PM
SA 8:30AM-2PM

FAMILY PRACTICE

JOHNSON, DANIEL
License Type: DO
Provider ID: 100041777002
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: 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: P, EB, E, R, WC
Hours: M-TH 8:30AM-9PM
F 8:30AM-5PM
SA 8:30AM-2PM

FQHC

IMPERIAL BEACH HEALTH CENTER,
Provider ID: PG0005455008
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: P, EB, E, R, WC
Hours: M-F 8AM-5PM

FQHC

IMPERIAL BEACH HEALTH CENTER,
Provider ID: PG0005455008
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: P, EB, E, R, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

RYAN, DANA
License Type: MD
Provider ID: 100315031001
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: 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: P, EB, E, R, WC

INTERNAL MEDICINE

RYAN, DANA
License Type: MD
Provider ID: 100315031001
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: 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: P, EB, E, R, WC

PEDIATRICS

DOKICH, SRETENKA
License Type: MD
Provider ID: 100113183002
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: No
IHP OF SOUTHERN CAL-PHP
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, E, R, WC

PEDIATRICS

DOKICH, SRETENKA
License Type: MD
Provider ID: 100113183002
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: 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: P, EB, E, R, WC

JULIAN

CLINIC OUTPATIENT

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: PG0127855003
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: WC
Hours: M-F 8AM-5PM

CLINIC OUTPATIENT

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: PG0127855003
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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider ID: 100174329025
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: 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

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider ID: 100174329025
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: 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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: PG0127855003
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: PG0127855003
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: WC
Hours: M-F 8AM-5PM

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN
License Type: MD
Provider ID: 100009674008
Provider Gender: Female
NPI: 1174504757
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

SA 8AM-12PM

PEDIATRICS

GANDHI, SHEETAL
License Type: MD
Provider ID: 100042472014
Provider Gender: Female
NPI: 1700858859
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

PARSONS, GENEVIEVE
License Type: MD
Provider ID: 100025668008
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

ROBERTS, KENDALL
License Type: MD
Provider ID: 100051398007
Provider Gender: Male
NPI: 1265762033
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

TUNG, VIVIAN
License Type: MD
Provider ID: 100012692006

C. Red de proveedores de atención primaria

Provider Gender: Female
NPI: 1285665133
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

LA MESA

PEDIATRICS

MOLINOS, NICOLE
License Type: MD
Provider ID: 100369169003
Provider Gender: Female
NPI: 1538685524
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 9AM-5PM

LAKESIDE

FAMILY PRACTICE

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 100350855016
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 100350855016
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N

Accessibility: EB, IB, E, R, WC

Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE LAKESIDE,

Provider ID: PG0024990055

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: WC

Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE LAKESIDE,

Provider ID: PG0024990055

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: WC

Hours: M-F 8AM-5PM

GENERAL PRACTICE

MANNINO, ELIZABETH

License Type: MD

Provider ID: 100016981004

Provider Gender: Female

License Number: A43914

NPI: 1548290463

Provider English Spoken: Y

Provider Language(s) Spoken: Italian, Spanish

Cultural Competency: N

Board Certified: 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: EB, IB, E, R, WC

Hours: M-F 8AM-5PM

GENERAL PRACTICE

MANNINO, ELIZABETH

License Type: MD

Provider ID: 100016981004

Provider Gender: Female

License Number: A43914

NPI: 1548290463

Provider English Spoken: Y

Provider Language(s) Spoken: Italian, Spanish

Cultural Competency: N

Board Certified: 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: EB, IB, E, R, WC

Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100216268005
Provider Gender: Male
License Number: A75411
NPI: 1265462196
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

License Type: MD
Provider ID: 100216268005
Provider Gender: Male
License Number: A75411
NPI: 1265462196
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

LEMON GROVE

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

License Type: NP
Provider ID: 100334978002
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

License Type: NP
Provider ID: 100334978002
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Accessibility: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100334680004
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100334680004
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

FAMILY PRACTICE

DORN, TIA
License Type: MD
Provider ID: 100398449001
Provider Gender: Female
License Number: C172318
NPI: 1285074740
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

FAMILY PRACTICE

DORN, TIA
License Type: MD
Provider ID: 100398449001
Provider Gender: Female
License Number: C172318
NPI: 1285074740
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

FAMILY PRACTICE

DORN, TIA
License Type: MD
Provider ID: 100398449001
Provider Gender: Female
License Number: C172318
NPI: 1285074740
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N

Accessibility: P, EB, IB, E, WC

Hours: M-F 9AM-5PM

FAMILY PRACTICE

KIM, YUHEE

License Type: MD

Provider ID: 100316390002

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC

Hours: M-F 9AM-5PM

FAMILY PRACTICE

KIM, YUHEE

License Type: MD

Provider ID: 100316390002

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC

Hours: M-F 9AM-5PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: PG0085568002

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: P, EB, IB, E

Hours: M-F 9AM-5PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: PG0085568002

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Accessibility: P, EB, IB, E
Hours: M-F 9AM-5PM

INTERNAL MEDICINE

GALLARES, DANIEL
License Type: MD
Provider ID: 100378240001
Provider Gender: Male
License Number: A165925
NPI: 1245689488
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

INTERNAL MEDICINE

GALLARES, DANIEL
License Type: MD
Provider ID: 100378240001
Provider Gender: Male
License Number: A165925
NPI: 1245689488
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208014
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208014
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

C. Red de proveedores de atención primaria

MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311007
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550

C. Red de proveedores de atención primaria

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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311007
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

License Type: MD
Provider ID: 100387235007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432010
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432010
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- *Provider English Spoken: Y*
- *Provider Language(s)*

C. Red de proveedores de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343007
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023011
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023011
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195013
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195013
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: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

N
Accessibility: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

PEDIATRICS

JACKSON, DANA
License Type: DO
Provider ID: 100335546017
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

PEDIATRICS

JACKSON, DANA
License Type: DO
Provider ID: 100335546017
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: 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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
License Type: NP
Provider ID: 100338677007
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: 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.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

C. Red de proveedores de atención primaria

N

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

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE

License Type: NP

Provider ID: 100338677007

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: 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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

ALGHAMDI, ASMA

License Type: MD

Provider ID: 100359014008

Provider Gender: Female

License Number: A167529

NPI: 1316310840

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

Hours: M-F 8AM-5PM

FAMILY PRACTICE

ALGHAMDI, ASMA

License Type: MD

Provider ID: 100359014008

Provider Gender: Female

License Number: A167529

NPI: 1316310840

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

Hours: M-F 8AM-5PM

FAMILY PRACTICE

ANDAYA, MIKHAEL

License Type: MD

Provider ID: 100391810001

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

C. Red de proveedores de atención primaria

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

ANDAYA, MIKHAEL
License Type: MD
Provider ID: 100391810001
Provider Gender: Male
License Number: A176878
NPI: 1780189209
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
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

BAEZ, BEATRICE
License Type: MD
Provider ID: 100334327001
Provider Gender: Female
License Number: A74777
NPI: 1245372507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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: 100334327001
Provider Gender: Female
License Number: A74777
NPI: 1245372507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-TU

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

FAMILY PRACTICE

CAMPBELL, BRIANNA
License Type: MD
Provider ID: 100360159003
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

CAMPBELL, BRIANNA
License Type: MD
Provider ID: 100360159003
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 100066452011
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 100066452011
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619)

C. Red de proveedores de atención primaria

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

FAMILY PRACTICE

CEVALLOS, JAMES
License Type: MD
Provider ID: 100079582006
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: 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: WC

FAMILY PRACTICE

CEVALLOS, JAMES
License Type: MD
Provider ID: 100079582006
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: 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: WC

FAMILY PRACTICE

DILLON, MAYRA
License Type: MD
Provider ID: 100163378004
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: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

DILLON, MAYRA
License Type: MD
Provider ID: 100163378004
Provider Gender: Female
License Number: A112571
NPI: 1629232715
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

LANUZA, MARK J
License Type: DO
Provider ID: 100362888004
Provider Gender: Male
License Number: 20A18460
NPI: 1992230593
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100362888004
Provider Gender: Male
License Number: 20A18460
NPI: 1992230593
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100334676003
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: 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

C. Red de proveedores de atención primaria

American Sign Language (ASL): N

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

FAMILY PRACTICE

LAW, KAREN

License Type: MD

Provider ID: 100334676003

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

FAMILY PRACTICE

LEUTE, ERIC

License Type: MD

Provider ID: 100092947010

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

FAMILY PRACTICE

LEUTE, ERIC

License Type: MD

Provider ID: 100092947010

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

FAMILY PRACTICE

MEDINA, ALEXANDER

License Type: MD

Provider ID: 100325216004

Provider Gender: Male

License Number: A133539

NPI: 1467714436

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC

FAMILY PRACTICE

MEDINA, ALEXANDER
License Type: MD
Provider ID: 100325216004
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: 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: WC

FAMILY PRACTICE

MOHAMEDI, NADIA
License Type: MD
Provider ID: 100340818002
Provider Gender: Female
License Number: A146819
NPI: 1477947364
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MOHAMEDI, NADIA
License Type: MD
Provider ID: 100340818002
Provider Gender: Female
License Number: A146819
NPI: 1477947364
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
License Type: MD
Provider ID: 100173914004

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
License Type: MD
Provider ID: 100173914004
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 100238268029
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: 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: WC

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 100238268029
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: No
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: WC

FAMILY PRACTICE

NOLASCO, JOANNA
License Type: MD
Provider ID: 100334048003
Provider Gender: Female
License Number: A138919
NPI: 1154749315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NOLASCO, JOANNA
License Type: MD
Provider ID: 100334048003
Provider Gender: Female
License Number: A138919
NPI: 1154749315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA
License Type: MD
Provider ID: 100377020004
Provider Gender: Male
License Number: A165184
NPI: 1336643345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA
License Type: MD
Provider ID: 100377020004
Provider Gender: Male
License Number: A165184
NPI: 1336643345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RICHARDSON, DANIELLE
License Type: MD
Provider ID: 100248844010
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

RICHARDSON, DANIELLE
License Type: MD
Provider ID: 100248844010
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

ROBERTS, POMAI
License Type: MD
Provider ID: 100323487003
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: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ROBERTS, POMAI
License Type: MD
Provider ID: 100323487003
Provider Gender: Female
License Number: A103218

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1023278314
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 100052890005
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 100052890005
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

SNOOK, BRIAN
License Type: DO
Provider ID: 100211994003
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

C. Red de proveedores de atención primaria

SNOOK, BRIAN
License Type: DO
Provider ID: 100211994003
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

STONES, RACHEL
License Type: MD
Provider ID: 100387928011
Provider Gender: Female
License Number: A167184
NPI: 1720583040
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: TH 8AM-2PM

FAMILY PRACTICE

STONES, RACHEL
License Type: MD
Provider ID: 100387928011
Provider Gender: Female
License Number: A167184
NPI: 1720583040
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: TH 8AM-2PM

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 100189428005
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 100189428005
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: 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: P, EB, IB, E, R, T, WC

FQHC

FAMILY HEALTH CTR SD NATIONAL CITY,
Provider ID: PG0085737002
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: P, EB, IB, E, R, T
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: PG0085737002
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: P, EB, IB, E, R, T
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: PG0010344011
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: PG0010344011
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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

FQHC

OPERATION SAMAHAN - NATIONAL CITY,
Provider ID: PG0084147002
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.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-6PM F 8AM-5PM

FQHC

OPERATION SAMAHAN - NATIONAL CITY,
Provider ID: PG0084147002
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.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-6PM F 8AM-5PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,
Provider ID: PG0084288002
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Hours: M-F 8AM-5PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,
Provider ID: PG0084288002
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
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH NATIONAL CITY,
Provider ID: PG0047542008
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH NATIONAL CITY,
Provider ID: PG0047542008
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PARADISE HILLS,
Provider ID: PG0047542006
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PARADISE HILLS,
Provider ID: PG0047542006
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

FQHC

SAN YSIDRO HEALTH

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,
Provider ID: PG0077626002
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,
Provider ID: PG0077626002
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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

BELLA, ARCHIE
License Type: MD
Provider ID: 100272915024
Provider Gender: Male
License Number: A134155
NPI: 1487098497
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: Adventist Health Bakersfield, PARADISE VALLEY HOSPITAL
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

BELLA, ARCHIE
License Type: MD
Provider ID: 100272915024
Provider Gender: Male
License Number: A134155
NPI: 1487098497
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: Adventist Health Bakersfield, PARADISE VALLEY HOSPITAL
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsamheath

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

THAYER, KARISA
License Type: MD
Provider ID: 100438880007
Provider Gender: Female
License Number: A140754
NPI: 1558765941
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
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: WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

THAYER, KARISA

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100438880007
Provider Gender: Female
License Number: A140754
NPI: 1558765941
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA
License Type: MD
Provider ID: 100167029013
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA
License Type: MD
Provider ID: 100167029013
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER
License Type: DO
Provider ID: 100166663026
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND

C. Red de proveedores de atención primaria

HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER
License Type: DO
Provider ID: 100166663026
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

BAILONY, MOHAMMED
License Type: MD
Provider ID: 100031774009
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: 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: WC
Hours: M-F 9AM-5PM

PEDIATRICS

BAILONY, AHMAD
License Type: MD
Provider ID: 100150899007
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,

C. Red de proveedores de atención primaria

SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 9AM-5PM

PEDIATRICS

BONSU, BEMA
License Type: MD
Provider ID: 100163084015
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: 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: WC

PEDIATRICS

BONSU, BEMA
License Type: MD
Provider ID: 100163084015
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: 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: WC

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462008
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: 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):

C. Red de proveedores de atención primaria

N

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

PEDIATRICS

CONE, STEPHANIE

License Type: MD

Provider ID: 100220462008

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

PEDIATRICS

DABU, LISA

License Type: MD

Provider ID: 100439935003

Provider Gender: Female

NPI: 1881128254

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

Hours: M-F 8AM-5PM

PEDIATRICS

DAY, CHRISTOPHER

License Type: MD

Provider ID: 100404966001

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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: 100404966001

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

C. Red de proveedores de atención primaria

Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA
License Type: MD
Provider ID: 100106150021
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: 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: P, EB, IB, E, R, WC
Hours: SU-SA 8AM-5PM

PEDIATRICS

GARCIA, RAFAEL
License Type: MD
Provider ID: 100088427010
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 100162078019
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: No
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 100162078019
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 100053947019
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 100053947019
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

LERIAS, NICHOLAS
License Type: DO
Provider ID: 100333850001
Provider Gender: Male
License Number: 20A14561
NPI: 1952749301
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PEDIATRICS

LERIAS, NICHOLAS
License Type: DO
Provider ID: 100333850001
Provider Gender: Male
License Number: 20A14561
NPI: 1952749301
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsamheath.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PEDIATRICS

RANA, DEBORAH
License Type: MD
Provider ID: 100334710002
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

RANA, DEBORAH
License Type: MD
Provider ID: 100334710002
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

UY, CARMELITA

License Type: MD

Provider ID: 100014861015

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: 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: WC

Hours: M-F 8AM-5PM

PEDIATRICS

VALENCIA, MARILES

License Type: MD

Provider ID: 100107858022

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: 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: EB, IB, E, R, T, WC

Hours: SU-SA 8AM-5PM

PEDIATRICS

WATHEN, JOSHUA

License Type: MD

Provider ID: 100383934004

Provider Gender: Male

NPI: 1528590510

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified: 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

Hours: M-F 9AM-5PM

OCEANSIDE

CERTIFIED NURSE PRACTITIONER

C. Red de proveedores de atención primaria

CORY, ALLISON
License Type: NP
Provider ID: 100340242019
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 100340242019
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 100340242019
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 100340242019
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N

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

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

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON

License Type: NP

Provider ID: 100340242019

Provider Gender: Female

License Number: NP20497

NPI: 1194027706

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON

License Type: NP

Provider ID: 100340242019

Provider Gender: Female

License Number: NP20497

NPI: 1194027706

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

License Type: NP

Provider ID: 100434266024

Provider Gender: Male

License Number: NP95003401

NPI: 1558607440

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

License Type: NP

Provider ID: 100434266024

Provider Gender: Male

License Number: NP95003401

NPI: 1558607440

Provider English Spoken: Y

Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN
License Type: NP
Provider ID: 100434266024
Provider Gender: Male
License Number: NP95003401
NPI: 1558607440
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN
License Type: NP
Provider ID: 100434266024
Provider Gender: Male
License Number: NP95003401
NPI: 1558607440
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN
License Type: NP
Provider ID: 100434266024
Provider Gender: Male
License Number: NP95003401
NPI: 1558607440
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN
License Type: NP
Provider ID: 100434266024
Provider Gender: Male
License Number: NP95003401
NPI: 1558607440
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 100358800004
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 100358800004
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

C. Red de proveedores de atención primaria

License Type: DO
Provider ID: 100358800004
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

License Type: DO
Provider ID: 100358800004
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

License Type: DO
Provider ID: 100358800004
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

License Type: DO
Provider ID: 100358800004
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 100368624007
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366003
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: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366032
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

C. Red de proveedores de atención primaria

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366032
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: 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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8AM-5PM*

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366003
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: 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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

KURUKULASURIYA, DAYANTHITHI
License Type: DO
Provider ID: 100326148001
Provider Gender: Female
License Number: 20A15689
NPI: 1205246865
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 605 CROUCH ST BLDG C OCEANSIDE, CA 92054
- *Phone: (760) 757-4566*
- *After Hours Phone: (760) 757-4566*
- *Website: www.ihpsocal.org*

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

FAMILY PRACTICE

KURUKULASURIYA, DAYANTHITHI

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Type: DO
Provider ID: 100326148001
Provider Gender: Female
License Number: 20A15689
NPI: 1205246865
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 757-4566
After Hours Phone: (760) 757-4566
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

FAMILY PRACTICE

MCDANIEL, LISA
License Type: MD
Provider ID: 100340931018
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA
License Type: MD
Provider ID: 100340931018
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA
License Type: MD
Provider ID: 100340931018
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

American Sign Language (ASL): N

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

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

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD

Provider ID: 100340931018

Provider Gender: Female

License Number: A145924

NPI: 1477933026

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD

Provider ID: 100340931018

Provider Gender: Female

License Number: A145924

NPI: 1477933026

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD

Provider ID: 100340931018

Provider Gender: Female

License Number: A145924

NPI: 1477933026

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

MILLER, DIANA

License Type: DO

Provider ID: 100350934006

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

MILLER, DIANA
License Type: DO
Provider ID: 100350934006
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 100425270015
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 100425270015
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

Provider ID: 100425270015

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

Provider ID: 100425270015

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

Provider ID: 100425270015

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

Provider ID: 100425270015

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

NGUYEN, DANIELA

License Type: DO

Provider ID: 100425270015

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

C. Red de proveedores de atención primaria

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 100322969001
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SAFI, ROOZCHEHR
License Type: MD
Provider ID: 100201387011
Provider Gender: Female
License Number: A116562
NPI: 1659563641
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760) 757-4566
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

FAMILY PRACTICE

SAFI, ROOZCHEHR
License Type: MD
Provider ID: 100201387011
Provider Gender: Female
License Number: A116562
NPI: 1659563641
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760) 757-4566
Website: www.ihpsocal.org

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747011
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747011
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747011
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747011
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

License Type: DO

Provider ID: 100464747011

Provider Gender: Male

License Number: 20A23095

NPI: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

License Type: DO

Provider ID: 100464747011

Provider Gender: Male

License Number: 20A23095

NPI: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

American Sign Language (ASL): N

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

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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

VIDAL, MONICA

License Type: DO

Provider ID: 100327876026

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FQHC

TRUECARE,

Provider ID: PG0065019005

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

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

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

FQHC

TRUECARE,

Provider ID: PG0065019005

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

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

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

FQHC

TRUECARE,

Provider ID: PG0092590005

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058

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

Hours: M-F 8AM-5PM

FQHC

TRUECARE,

Provider ID: PG0092590005

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058

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

Hours: M-F 8AM-5PM

FQHC

TRUECARE,

Provider ID: PG0092588009

C. Red de proveedores de atención primaria

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

FQHC

TRUECARE,
Provider ID: PG0092588009
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
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409009
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
Accessibility: WC
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409009
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: WC
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409009
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

American Sign Language (ASL): N
Accessibility: WC
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409009
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: WC
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409009
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
Accessibility: WC
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409009
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: WC
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,
Provider ID: PG0084639008
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: WC
Hours: M-F 8AM-5PM

FQHC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

VISTA COMMUNITY CLINIC HORNE STREET,
Provider ID: PG0084639008
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: WC
Hours: M-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,
Provider ID: PG0084683008
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: WC
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,
Provider ID: PG0084683008
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: WC
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

GOMEZ, DENISE
License Type: MD
Provider ID: 100101820004
Provider Gender: Female
License Number: A66289
NPI: 1407871817
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760) 757-4566
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

INTERNAL MEDICINE

GOMEZ, DENISE
License Type: MD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider ID: 100101820004
Provider Gender: Female
License Number: A66289
NPI: 1407871817
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760) 757-4566
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 100331755014
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 100331755014
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 100331755014
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 100331755014
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 100331755014
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 100331755014
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD

Provider ID: 100047644006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 100047644005
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: 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

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 100047644005
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: 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

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 100085608007
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: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760)

C. Red de proveedores de atención primaria

736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 100085608007
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: 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
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 100085608008
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

DANIELS, SARAH
License Type: MD
Provider ID: 100245457006
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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA
License Type: MD
Provider ID: 100202524014
Provider Gender: Female
License Number: A109056

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA

License Type: MD

Provider ID: 100202524014

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: 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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

PEDIATRICS

KRAMER, MELISSA

License Type: MD

Provider ID: 100348246028

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

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

PEDIATRICS

MAC, VICTOR

License Type: DO

Provider ID: 100383397009

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: No

IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

PEDIATRICS

MAC, VICTOR
License Type: DO
Provider ID: 100383397009
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: 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
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

MACINTYRE, ELIZABETH
License Type: MD
Provider ID: 100374046003
Provider Gender: Female
NPI: 1336520766
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 100246061003
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 100246061003
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

C. Red de proveedores de atención primaria

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 100246061003
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 100246061003
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 100246061003
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider ID: 100246061003
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

MILLER, DONALD
License Type: MD
Provider ID: 100061376022
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: 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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM

PEDIATRICS

NOVOTA, GABRIELA
License Type: MD
Provider ID: 100438531002
Provider Gender: Female
NPI: 1154520096
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

PARK, RONALD
License Type: MD
Provider ID: 100077687034
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: No
RADY CHILDRENS HEALTH

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4:30PM

PEDIATRICS

PERKINS, RACHEL
License Type: MD
Provider ID: 100214912006
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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

C. Red de proveedores de atención primaria

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

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974020
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM

POWAY

FAMILY PRACTICE

KAUR, JATINDER
License Type: MD
Provider ID: 100315025008
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

KAUR, JATINDER
License Type: MD
Provider ID: 100315025008
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,
Provider ID: PG0092632005
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
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,
Provider ID: PG0092632005
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

PEDIATRICS

CURET, ZULMA
License Type: MD
Provider ID: 100246070017
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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

CURET, ZULMA
License Type: MD
Provider ID: 100246070017
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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

LINDBACK, SARAH
License Type: MD
Provider ID: 100192227006
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

LOSTETTER, ADRIENNE
License Type: MD
Provider ID: 100188237012
Provider Gender: Female
NPI: 1881607984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

C. Red de proveedores de atención primaria

CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

MOREIRA, LUCILA
License Type: DO
Provider ID: 100320803012
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: 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: P, EB, IB, E, R
Hours: SU-SA 8AM-5PM

PEDIATRICS

MORTIMER, DORI
License Type: MD
Provider ID: 100101440011
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: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

RAMGREN, AILEEN
License Type: DO
Provider ID: 100287887011
Provider Gender: Female
NPI: 1356785505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

DIEGO, PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

TAI, KUANGKAI
License Type: MD
Provider ID: 100026577007
Provider Gender: Male
NPI: 1396744066
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5PM
SA 8:30AM-12PM

RAMONA

FQHC

TRUECARE,
Provider ID: PG0025086045
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: P, EB, IB, E, R
Hours: M-F 8AM-5PM
SA 8AM-12PM

FQHC

TRUECARE,
Provider ID: PG0025086045
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: P, EB, IB, E, R
Hours: M-F 8AM-5PM
SA 8AM-12PM

INTERNAL MEDICINE

HO, LYSA
License Type: DO
Provider ID: 100437431003
Provider Gender: Female

License Number: 20A17507
NPI: 1821494337
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R
Hours: M-F 8AM-5PM
SA 8AM-12PM

INTERNAL MEDICINE

HO, LYSA
License Type: DO
Provider ID: 100437431003
Provider Gender: Female
License Number: 20A17507
NPI: 1821494337
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R
Hours: M-F 8AM-5PM
SA 8AM-12PM

INTERNAL MEDICINE

YUNG, DORIS
License Type: MD
Provider ID: 100036513002
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: 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: P, EB, IB, E, R

INTERNAL MEDICINE

YUNG, DORIS
License Type: MD
Provider ID: 100036513002
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: 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: P, EB, IB, E, R

SAN DIEGO

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA
License Type: NP
Provider ID: 100376099003
Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA
License Type: NP
Provider ID: 100376099003
Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 100334811003
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 100334811003
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

C. Red de proveedores de atención primaria

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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN
License Type: NP
Provider ID: 100331056004
Provider Gender: Female
License Number: NP22031
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, IB, E, R, T, WC
Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN
License Type: NP
Provider ID: 100331056004
Provider Gender: Female
License Number: NP22031
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, IB, E, R, T, WC
Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
License Type: NP
Provider ID: 100338677006
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: 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: P, EB, IB, E, R,

T, WC

Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE

License Type: NP

Provider ID: 100338677006

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

Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

License Type: NP

Provider ID: 100350015003

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y

Provider Language(s) Spoken: Mandarin, Yue Chinese

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

License Type: NP

Provider ID: 100350015003

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y

Provider Language(s) Spoken: Mandarin, Yue Chinese

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139005

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 100246139005
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 100246139005
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 100246139006
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: 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

C. Red de proveedores de atención primaria

American Sign Language (ASL): N

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

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139006

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139005

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139006

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 100246139006

Provider Gender: Female

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005006
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005003
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005006
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005003
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005003
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005003
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 100334005003
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE

C. Red de proveedores de atención primaria

PRACTITIONER

PATEL, KELLY

License Type: NP

Provider ID: 100334546001

Provider Gender: Female

License Number: NP95004735

NPI: 1033493747

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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: 100334546001

Provider Gender: Female

License Number: NP95004735

NPI: 1033493747

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

ROGERS, TANYA

License Type: NP

Provider ID: 100333497005

Provider Gender: Female

License Number: NP95004443

NPI: 1558710038

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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

CERTIFIED NURSE PRACTITIONER

ROGERS, TANYA

License Type: NP

Provider ID: 100333497005

Provider Gender: Female

License Number: NP95004443

NPI: 1558710038

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN
License Type: NP
Provider ID: 100022485005
Provider Gender: Female
License Number: NP10906
NPI: 1295750339
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN
License Type: NP
Provider ID: 100022485005
Provider Gender: Female
License Number: RN486421
NPI: 1295750339
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN
License Type: NP
Provider ID: 100022485005
Provider Gender: Female
License Number: NP10906
NPI: 1295750339
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN
License Type: NP
Provider ID: 100022485005
Provider Gender: Female
License Number: RN486421
NPI: 1295750339

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA
License Type: NP
Provider ID: 100333789002
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA
License Type: NP
Provider ID: 100333789002
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA
License Type: NP
Provider ID: 100333789001
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA
License Type: NP

Provider ID: 100333789002
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA
License Type: NP
Provider ID: 100333789002
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA
License Type: NP
Provider ID: 100333789001
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA
License Type: NP
Provider ID: 100334532003
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

License Type: NP

Provider ID: 100334532003

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

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

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

License Type: NP

Provider ID: 100378255001

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

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

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

License Type: NP

Provider ID: 100378255001

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

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

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: PG0083903002

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):

C. Red de proveedores de atención primaria

N

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

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: PG0083903002

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

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

FAMILY PRACTICE

ABDALLAH, ALI

License Type: DO

Provider ID: 100334426003

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

ABDALLAH, ALI

License Type: DO

Provider ID: 100334426003

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 100360099005

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

HOSPITAL
Board Certified: 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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 100360099005
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: 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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 100378244002
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 100378244002
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 100378193002
Provider Gender: Female

C. Red de proveedores de atención primaria

License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 100378193001
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 100378193001
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 100378193002
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

FAMILY PRACTICE

BAHRAMZI, MARIA

License Type: MD
Provider ID: 100378193001
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

BAHRAMZI, MARIA

License Type: MD
Provider ID: 100378193001
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

BAIN, NATALIE

License Type: MD
Provider ID: 100430314001
Provider Gender: Female
License Number: A183464
NPI: 1821677584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

BAIN, NATALIE

License Type: MD
Provider ID: 100430314001
Provider Gender: Female
License Number: A183464
NPI: 1821677584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

BELL, TRACY
License Type: MD
Provider ID: 100424087006
Provider Gender: Female
License Number: G188438
NPI: 1497821318
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BELL, TRACY
License Type: MD
Provider ID: 100424087006
Provider Gender: Female
License Number: G188438
NPI: 1497821318
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BELL, TRACY
License Type: MD
Provider ID: 100424087006
Provider Gender: Female
License Number: G188438
NPI: 1497821318
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BELL, TRACY
License Type: MD
Provider ID: 100424087006
Provider Gender: Female
License Number: G188438
NPI: 1497821318
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BELL, TRACY
License Type: MD
Provider ID: 100424087006
Provider Gender: Female
License Number: G188438
NPI: 1497821318
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BISHOP, MELISSA
License Type: MD
Provider ID: 100245799016
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: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BISHOP, MELISSA
License Type: MD
Provider ID: 100245799016
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: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA
License Type: MD
Provider ID: 100389370002
Provider Gender: Female
License Number: A165398
NPI: 1730684200
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, IB, E, R, T, WC
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FAMILY PRACTICE

BODIFORD, SAMANTHA
License Type: MD
Provider ID: 100389370002
Provider Gender: Female
License Number: A165398
NPI: 1730684200
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

C. Red de proveedores de atención primaria

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: P, IB, E, R, T, WC
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FAMILY PRACTICE

BRADY, PATRICIA
License Type: MD
Provider ID: 100034611006
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: 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: EB, IB, E
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

FAMILY PRACTICE

BRADY, PATRICIA
License Type: MD
Provider ID: 100034611006
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: 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: EB, IB, E
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

FAMILY PRACTICE

BRODSKY, MARK
License Type: MD
Provider ID: 100038468003
Provider Gender: Male
License Number: C53623
NPI: 1346337904
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

BRODSKY, MARK

License Type: MD

Provider ID: 100038468003

Provider Gender: Male

License Number: C53623

NPI: 1346337904

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON

License Type: MD

Provider ID: 100332143005

Provider Gender: Male

License Number: A148499

NPI: 1013399559

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

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

FAMILY PRACTICE

BROWN, BRANDON

License Type: MD

Provider ID: 100332143005

Provider Gender: Male

License Number: A148499

NPI: 1013399559

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

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

FAMILY PRACTICE

BURTON, LUCAS

License Type: DO

Provider ID: 100416070003

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 100416070003
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 100416070003
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 100416070003
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA
License Type: MD
Provider ID: 100360159009
Provider Gender: Female

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

CAMPBELL, BRIANNA
License Type: MD
Provider ID: 100360159009
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 100066452009
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, IB, E, T, WC

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 100066452009
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, IB, E, T, WC

FAMILY PRACTICE

C. Red de proveedores de atención primaria

CHOU, BILL
License Type: DO
Provider ID: 100334680002
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100334680002
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100334680003
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100334680002
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

CHOU, BILL
License Type: DO

C. Red de proveedores de atención primaria

Provider ID: 100334680002
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100334680003
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

CLARK, DONIA
License Type: MD
Provider ID: 100391055006
Provider Gender: Female
License Number: A178849
NPI: 1689238560
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CLARK, DONIA
License Type: MD
Provider ID: 100391055006
Provider Gender: Female
License Number: A178849
NPI: 1689238560
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORMAN, DANIEL

License Type: DO

Provider ID: 100334102002

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL

License Type: DO

Provider ID: 100334102002

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

DAPPEN, AMANDA

License Type: MD

Provider ID: 100347310004

Provider Gender: Female

License Number: A153414

NPI: 1689037111

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, IB, E, T, WC

Hours: M-F 8AM-5PM

FAMILY PRACTICE

DAPPEN, AMANDA

License Type: MD

Provider ID: 100347310004

Provider Gender: Female

License Number: A153414

NPI: 1689037111

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

DAVIS, DEIRDRE
License Type: MD
Provider ID: 100375869003
Provider Gender: Female
License Number: A165432
NPI: 1265921365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

DAVIS, DEIRDRE
License Type: MD
Provider ID: 100375869003
Provider Gender: Female
License Number: A165432
NPI: 1265921365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

FAMBRO, CYNTHIA
License Type: MD
Provider ID: 100350838003
Provider Gender: Female
License Number: A153223
NPI: 1710331707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

FAMBRO, CYNTHIA
License Type: MD
Provider ID: 100350838003
Provider Gender: Female
License Number: A153223
NPI: 1710331707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 100398051002
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 100398051001
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 100398051001
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 100398051002
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

FAMILY PRACTICE

GLEASON-ROHRER, GWEN
License Type: MD
Provider ID: 100216048003
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: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

GLEASON-ROHRER, GWEN
License Type: MD
Provider ID: 100216048003
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: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

GRIFFITHS, KENNETH
License Type: MD
Provider ID: 100031582004
Provider Gender: Male
License Number: C52451
NPI: 1760563068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

GRIFFITHS, KENNETH
License Type: MD
Provider ID: 100031582004
Provider Gender: Male

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Number: C52451
NPI: 1760563068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

GUTIERREZ, TANIA
License Type: DO
Provider ID: 100395515002
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA
License Type: DO
Provider ID: 100395515002
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 100333820002
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 100333820001
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 100333820002
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 100333820001
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HENDRIX, JEFFERSON
License Type: MD
Provider ID: 100331671011
Provider Gender: Male
License Number: A32571
NPI: 1235142738
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Accessibility: WC

FAMILY PRACTICE

HENDRIX, JEFFERSON
License Type: MD
Provider ID: 100331671011
Provider Gender: Male
License Number: A32571
NPI: 1235142738
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

HERNANDEZ, RALPH
License Type: MD
Provider ID: 100080408029
Provider Gender: Male
License Number: C42207
NPI: 1285782151
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

HERNANDEZ, RALPH
License Type: MD
Provider ID: 100080408029
Provider Gender: Male
License Number: C42207
NPI: 1285782151
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

HUANG, CRYSTAL
License Type: MD
Provider ID: 100443976009
Provider Gender: Female
License Number: A183903
NPI: 1043898497
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R,

C. Red de proveedores de atención primaria

T, WC

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

FAMILY PRACTICE

HUANG, CRYSTAL

License Type: MD
Provider ID: 100443976009
Provider Gender: Female
License Number: A183903
NPI: 1043898497
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-12PM

FAMILY PRACTICE

JAINCHILL, AMANDA

License Type: MD
Provider ID: 100392584011
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM

FAMILY PRACTICE

JAINCHILL, AMANDA

License Type: MD
Provider ID: 100392584011
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER

License Type: MD
Provider ID: 100334427002
Provider Gender: Female
License Number: G149974
NPI: 1407818768
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER
License Type: MD
Provider ID: 100334427002
Provider Gender: Female
License Number: G149974
NPI: 1407818768
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI
License Type: MD
Provider ID: 100106751002
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI
License Type: MD
Provider ID: 100106751002
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: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KIDDER, BRENDAN
License Type: MD
Provider ID: 100334556002
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: 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: P, IB, E, T, WC

FAMILY PRACTICE

KIDDER, BRENDAN
License Type: MD
Provider ID: 100334556002
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: 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: P, IB, E, T, WC

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 100394942009
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 100394942009
Provider Gender: Female
License Number: A177922
NPI: 1679137780

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 100394942010
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 100394942009
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 100394942009
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LACH, REBECCA

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100394942010
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 100341199006
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 100341199006
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 100341199006
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R,

T, WC, ME

FAMILY PRACTICE

LEE, SANDRINE

License Type: DO

Provider ID: 100341199006

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s) Spoken: French

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

LINDEMAN, KURTIS

License Type: MD

Provider ID: 100042713008

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: 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: EB, IB, E

Hours: M-F 8AM-5PM

FAMILY PRACTICE

LINDEMAN, KURTIS

License Type: MD

Provider ID: 100042713008

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: 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: EB, IB, E

Hours: M-F 8AM-5PM

FAMILY PRACTICE

LOUGH, MICHELLE

License Type: MD

Provider ID: 100398911001

Provider Gender: Female

License Number: A165872

NPI: 1053816496

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

LOUGH, MICHELLE
License Type: MD
Provider ID: 100398911001
Provider Gender: Female
License Number: A165872
NPI: 1053816496
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

LU, JULIE
License Type: DO
Provider ID: 100332171001
Provider Gender: Female
License Number: 20A14804
NPI: 1619210614
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

LU, JULIE
License Type: DO
Provider ID: 100332171001
Provider Gender: Female
License Number: 20A14804
NPI: 1619210614
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 100344918001
Provider Gender: Female
License Number: A161682
NPI: 1841726148
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 100344918001
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 100242887003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 100242887003
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: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 100242887013
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 100242887013
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: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 100242887003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MARSTON, JACQUELINE

C. Red de proveedores de atención primaria

License Type: DO
Provider ID: 100242887003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 100386473001
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 100386473001
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 100386473002
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 100386473002
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100386473001
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 100386473001
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

MELGAR, MONICA
License Type: MD
Provider ID: 100361542001
Provider Gender: Female
License Number: A154399
NPI: 1629432174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

FAMILY PRACTICE

MELGAR, MONICA
License Type: MD
Provider ID: 100361542001
Provider Gender: Female
License Number: A154399
NPI: 1629432174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA
License Type: MD
Provider ID: 100363732002
Provider Gender: Female
License Number: A162332
NPI: 1063945657
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA
License Type: MD
Provider ID: 100363732002
Provider Gender: Female
License Number: A162332
NPI: 1063945657
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, IB, E, T, WC

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
License Type: MD
Provider ID: 100173914018
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: 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: WC

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
License Type: MD
Provider ID: 100173914018
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: 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: WC

FAMILY PRACTICE

NGUYEN, NGOC
License Type: MD
Provider ID: 100228458021
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: 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: WC

FAMILY PRACTICE

NGUYEN, NGOC
License Type: MD
Provider ID: 100228458021
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: 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: WC

FAMILY PRACTICE

NGUYEN-CLEARY, THAI

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100082824003
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

NGUYEN-CLEARY, THAI
License Type: MD
Provider ID: 100082824003
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

NIAZI, HARRIS
License Type: MD
Provider ID: 100334378002
Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

NIAZI, HARRIS
License Type: MD
Provider ID: 100334378002
Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

NORRIS, JEFFREY
License Type: MD
Provider ID: 100334872001
Provider Gender: Male
License Number: A136275
NPI: 1073870374
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NORTON, LISA
License Type: MD
Provider ID: 100377832006
Provider Gender: Female
License Number: C159591
NPI: 1720181084
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

NORTON, LISA
License Type: MD
Provider ID: 100377832006
Provider Gender: Female
License Number: C159591
NPI: 1720181084
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

NUQUI, JOSIE
License Type: MD
Provider ID: 100334732002
Provider Gender: Female
License Number: A71544
NPI: 1184773673
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
SA 8:30AM-5PM

FAMILY PRACTICE

NUQUI, JOSIE
License Type: MD
Provider ID: 100334732002
Provider Gender: Female
License Number: A71544
NPI: 1184773673
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
SA 8:30AM-5PM

FAMILY PRACTICE

OROZCO, KATHILEEN
License Type: DO
Provider ID: 100414018023
Provider Gender: Female
License Number: 20A21632
NPI: 1871122473
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OROZCO, KATHILEEN
License Type: DO
Provider ID: 100414018023
Provider Gender: Female
License Number: 20A21632
NPI: 1871122473
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 100337666002
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 100337666002
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PROPST, TOBE
License Type: MD
Provider ID: 100235534008
Provider Gender: Male
License Number: A82123
NPI: 1194814277
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E

FAMILY PRACTICE

PROPST, TOBE
License Type: MD
Provider ID: 100235534008
Provider Gender: Male
License Number: A82123
NPI: 1194814277
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: EB, IB, E

FAMILY PRACTICE

RAGUVEER, VISHAKA
License Type: MD
Provider ID: 100402320008
Provider Gender: Female
NPI: 1740609387
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RAGUVEER, VISHAKA
License Type: MD
Provider ID: 100402320003
Provider Gender: Female
License Number: A172736
NPI: 1740609387
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
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: 100402320003
Provider Gender: Female
License Number: A172736
NPI: 1740609387
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE

RASHID, SAMAR
License Type: DO
Provider ID: 100326087045
Provider Gender: Female
License Number: 20A14646
NPI: 1811394869
Provider English Spoken: Y
Provider Language(s) Spoken: French, Urdu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

FAMILY PRACTICE

RASHID, SAMAR
License Type: DO
Provider ID: 100326087045
Provider Gender: Female
License Number: 20A14646
NPI: 1811394869
Provider English Spoken: Y
Provider Language(s) Spoken: French, Urdu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

RIDGE, NEAL
License Type: DO
Provider ID: 100356750011
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

RIDGE, NEAL
License Type: DO
Provider ID: 100356750011
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

RODRIGUEZ, SEAN
License Type: MD
Provider ID: 100197884007
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RODRIGUEZ, SEAN
License Type: MD
Provider ID: 100197884007
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: 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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ROSADO, IVAN
License Type: MD
Provider ID: 100365788011
Provider Gender: Male
License Number: A169434
NPI: 1316479603
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ROSADO, IVAN
License Type: MD
Provider ID: 100365788011
Provider Gender: Male
License Number: A169434
NPI: 1316479603
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 100052890004
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 100052890004
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM

FAMILY PRACTICE

SCOTT, RYLEE
License Type: MD
Provider ID: 100361816001
Provider Gender: Male
License Number: A162946
NPI: 1457887911
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

SCOTT, RYLEE
License Type: MD
Provider ID: 100361816001
Provider Gender: Male
License Number: A162946
NPI: 1457887911
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

SHEIKH, ZARA

License Type: MD

Provider ID: 100386354002

Provider Gender: Female

License Number: A163512

NPI: 1952808727

Provider English Spoken: Y

Provider Language(s) Spoken: Urdu

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

SHEIKH, ZARA

License Type: MD

Provider ID: 100386354001

Provider Gender: Female

License Number: A163512

NPI: 1952808727

Provider English Spoken: Y

Provider Language(s) Spoken: Urdu

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC

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

FAMILY PRACTICE

SHEIKH, ZARA

License Type: MD

Provider ID: 100386354002

Provider Gender: Female

License Number: A163512

NPI: 1952808727

Provider English Spoken: Y

Provider Language(s) Spoken: Urdu

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

SHEIKH, ZARA

License Type: MD

Provider ID: 100386354001

Provider Gender: Female

License Number: A163512

NPI: 1952808727

Provider English Spoken: Y

Provider Language(s) Spoken: Urdu

Cultural Competency: N

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM

FAMILY PRACTICE

SHIRAKI, JEAN
License Type: DO
Provider ID: 100352423002
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SHIRAKI, JEAN
License Type: DO
Provider ID: 100352423002
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SHUMILAK, KAILI
License Type: DO
Provider ID: 100334400003
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SHUMILAK, KAILI
License Type: DO
Provider ID: 100334400003
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Board Certified: 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: R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SMOOT, CHARLES
License Type: MD
Provider ID: 100334463001
Provider Gender: Male
License Number: A97036
NPI: 1245490358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

SMOOT, CHARLES
License Type: MD
Provider ID: 100334463002
Provider Gender: Male
License Number: A97036
NPI: 1245490358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SMOOT, CHARLES
License Type: MD
Provider ID: 100334463001
Provider Gender: Male
License Number: A97036
NPI: 1245490358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

SMOOT, CHARLES
License Type: MD
Provider ID: 100334463002
Provider Gender: Male
License Number: A97036
NPI: 1245490358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

SNYDER, CHRISTOPHER
License Type: DO
Provider ID: 100024789051
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: 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: WC

FAMILY PRACTICE

SNYDER, CHRISTOPHER
License Type: DO
Provider ID: 100024789051
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: 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: WC

FAMILY PRACTICE

SOPHY, ELIZABETH
License Type: MD
Provider ID: 100376174008
Provider Gender: Female
License Number: A157547
NPI: 1013441203
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

C. Red de proveedores de atención primaria

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: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

SOPHY, ELIZABETH
License Type: MD
Provider ID: 100376174008
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: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY
License Type: MD
Provider ID: 100144484003
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: 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: P, IB, E, R, T, WC

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY
License Type: MD
Provider ID: 100144484003
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

VISTA
Board Certified: 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: P, IB, E, R, T, WC

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 100097829006
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: 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: EB, IB, E
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 100097829006
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: 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: EB, IB, E
Hours: M-F 8AM-5PM

FAMILY PRACTICE

THAI, JUSTIN
License Type: MD
Provider ID: 100400371001
Provider Gender: Male
License Number: A177462
NPI: 1093276198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N

Accessibility: P, EB, IB, E, WC, ME

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

FAMILY PRACTICE

THAI, JUSTIN

License Type: MD

Provider ID: 100400371002

Provider Gender: Male

License Number: A177462

NPI: 1093276198

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

THAI, JUSTIN

License Type: MD

Provider ID: 100400371001

Provider Gender: Male

License Number: A177462

NPI: 1093276198

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, WC, ME

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

FAMILY PRACTICE

THAI, JUSTIN

License Type: MD

Provider ID: 100400371002

Provider Gender: Male

License Number: A177462

NPI: 1093276198

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

THOMAS, ZACHARY

License Type: MD

Provider ID: 100334749002

Provider Gender: Male

License Number: A145023

NPI: 1326453119

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

THOMAS, ZACHARY
License Type: MD
Provider ID: 100334749002
Provider Gender: Male
License Number: A145023
NPI: 1326453119
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

TRAN, UYEN-THAO
License Type: MD
Provider ID: 100105627004
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

TRAN, UYEN-THAO
License Type: MD
Provider ID: 100105627004
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

C. Red de proveedores de atención primaria

N

Accessibility: P, EB, IB, E, WC, ME

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

FAMILY PRACTICE

TRUONG, NHA

License Type: DO

Provider ID: 100395735004

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

TRUONG, NHA

License Type: DO

Provider ID: 100395735004

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

TSUCHIYA, KIMIKO

License Type: DO

Provider ID: 100401489005

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E

Hours: M-F 8AM-5PM

FAMILY PRACTICE

TSUCHIYA, KIMIKO

License Type: DO

Provider ID: 100401489005

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E
Hours: M-F 8AM-5PM

FAMILY PRACTICE

VALENZUELA, TRICIA
License Type: MD
Provider ID: 100363737001
Provider Gender: Female
License Number: A161373
NPI: 1346776358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

VALENZUELA, TRICIA
License Type: MD
Provider ID: 100363737001
Provider Gender: Female
License Number: A161373
NPI: 1346776358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

WANG, REGINA
License Type: MD
Provider ID: 100145123010
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: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

WANG, REGINA
License Type: MD
Provider ID: 100145123010
Provider Gender: Female
License Number: A109828
NPI: 1154554871
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

WU, JENNIFER
License Type: MD
Provider ID: 100017400008
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: 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: EB, IB, E
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

WU, JENNIFER
License Type: MD
Provider ID: 100017400008
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: 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: EB, IB, E
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

ZAHLER, MARVIN
License Type: DO
Provider ID: 100320547007
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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):

C. Red de proveedores de atención primaria

N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

ZAHLER, MARVIN
License Type: DO
Provider ID: 100320547007
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

ZINK, IRENE
License Type: MD
Provider ID: 100324255004
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: 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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ZINK, IRENE
License Type: MD
Provider ID: 100324255004
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: 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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,
Provider ID: PG0025044020
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-F 8:30AM-5:30PM

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,
Provider ID: PG0025044020
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: P, EB, IB, E, R, T, ME
Hours: M-F 8:30AM-5:30PM

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,
Provider ID: PG0084437002
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
Hours: M-F 8AM-5PM

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,
Provider ID: PG0084437002
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
Hours: M-F 8AM-5PM

FQHC

FAMILY HEALTH CTR IBARRA,
Provider ID: PG0084517002
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: P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR IBARRA,

C. Red de proveedores de atención primaria

Provider ID: PG0084517002
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: P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,
Provider ID: PG0083911002
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: IB, E, R
Hours: M-F 8AM-5PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,
Provider ID: PG0083911002
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: IB, E, R
Hours: M-F 8AM-5PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: PG0084522007
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
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: PG0084522007
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

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: PG0084522002
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
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: PG0084522002
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
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,
Provider ID: PG0083950002
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
Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,
Provider ID: PG0083950002
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
Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,
Provider ID: PG0085338002
NPI: 1356750376

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,
Provider ID: PG0085338002
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: P, EB, IB, E, R, T
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: PG0083156002
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: P, EB, IB, E, R, T
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: PG0083156002
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: P, EB, IB, E, R, T
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SD HILLCREST,
Provider ID: PG0084516002
NPI: 1629456900
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE

C. Red de proveedores de atención primaria

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

FQHC

FAMILY HLTH CTR SD HILLCREST,
Provider ID: PG0084516002
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
Hours: M-TH 8AM-9PM F 8AM-5PM

FQHC

KING CHAVEZ HEALTH CENTER,
Provider ID: PG0047560011
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FQHC

KING CHAVEZ HEALTH CENTER,
Provider ID: PG0047560011
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM

FQHC

LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT,
Provider ID: PG0135214003
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): N

FQHC

LA MAESTRA COMMUNITY

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

HEALTH CENTERS - 4074 FAIRMOUNT,
Provider ID: PG0135214003
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): N

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: PG0010344009
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
Fax: (619) 795-9849
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: PG0010344009
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
Fax: (619) 795-9849
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: PG0024858006
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: PG0024858006
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)

C. Red de proveedores de atención primaria

279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: PG0024858006
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: PG0024858006
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: PG0025044045
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

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: PG0025044045
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

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

C. Red de proveedores de atención primaria

Provider ID: PG0025044019
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: ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: PG0025044019
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: ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: PG0049261012
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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: PG0049261011
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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: PG0049261012
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: PG0049261011
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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,
Provider ID: PG0031643005
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: P, IB, E, R, T, WC
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,
Provider ID: PG0031643005
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: P, IB, E, R, T, WC
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: PG0025044022
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, ME

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: PG0084186002
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: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: PG0025044022
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: P, EB, IB, E, R, T, ME

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: PG0025044022
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: P, EB, IB, E, R, T, ME

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: PG0084186002
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: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM

FQHC

C. Red de proveedores de atención primaria

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: PG0025044022
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: P, EB, IB, E, R, T, ME

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: PG0083606002
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.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC, ME
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: PG0083606002
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.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC, ME
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: PG0083606004
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.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: PG0083606004
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.opsam.org

C. Red de proveedores de atención primaria

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

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: PG0083903002
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
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: PG0083903002
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
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO FAMILY CARE,
Provider ID: PG0092672005
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: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FQHC

SAN DIEGO FAMILY CARE,
Provider ID: PG0092672005
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: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM

C. Red de proveedores de atención primaria

W-F 8:30AM-5:30PM
SA 9AM-4PM

FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,
Provider ID: PG0094135002
NPI: 1598308926
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
Fax: (619) 238-5551
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,
Provider ID: PG0094135002
NPI: 1598308926
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
Fax: (619) 238-5551
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: PG0047560008
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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: PG0047560008
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: P, IB, E, T, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
Provider ID: PG0094138002
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)

C. Red de proveedores de atención primaria

662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
Provider ID: PG0094138002
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,
Provider ID: PG0128177003
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,
Provider ID: PG0128177003
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: WC
Hours: M-F 8AM-5PM

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,
Provider ID: PG0082766002
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: P, EB, IB, E, R, T, ME

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,
Provider ID: PG0082766002
NPI: 1174549232

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,
Provider ID: PG0086361007
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
Hours: M-F 8AM-5:30PM

GENERAL PRACTICE

ALONZO, SHIRIN
License Type: MD
Provider ID: 100199975008
Provider Gender: Male
License Number: A119906
NPI: 1225318041
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, CEDARS SINAI MEDICAL CENTER
Board Certified: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

GENERAL PRACTICE

ALONZO, SHIRIN
License Type: MD
Provider ID: 100199975008
Provider Gender: Male
License Number: A119906
NPI: 1225318041
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Hospital Affiliation: GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, CEDARS SINAI MEDICAL CENTER
Board Certified: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL
License Type: MD
Provider ID: 100350009002
Provider Gender: Female
License Number: A152267
NPI: 1730570144
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM SA 8AM-2PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL
License Type: MD
Provider ID: 100350009002
Provider Gender: Female
License Number: A152267
NPI: 1730570144
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM SA 8AM-2PM

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 100315023004
Provider Gender: Female
License Number: A122238
NPI: 1982044483
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E,

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

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 100315023004
Provider Gender: Female
License Number: A122238
NPI: 1982044483
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 100315023005
Provider Gender: Female
License Number: A122238
NPI: 1982044483
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 100315023005
Provider Gender: Female
License Number: A122238
NPI: 1982044483
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 100134749005
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: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 100134749005
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: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

ARGOUD, GEORGES
License Type: MD
Provider ID: 100053174110
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: 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

INTERNAL MEDICINE

ARGOUD, GEORGES
License Type: MD
Provider ID: 100053174110
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: No
LA MAESTRA FAMILY CLINIC

C. Red de proveedores de atención primaria

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

INTERNAL MEDICINE

BALL, SHELDON
License Type: MD
Provider ID: 100394482008
Provider Gender: Male
License Number: G61521
NPI: 1689646275
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

BALL, SHELDON
License Type: MD
Provider ID: 100394482008
Provider Gender: Male
License Number: G61521
NPI: 1689646275
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

BALL, SHELDON
License Type: MD
Provider ID: 100394482008
Provider Gender: Male
License Number: G61521
NPI: 1689646275
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

BALL, SHELDON
License Type: MD
Provider ID: 100394482008
Provider Gender: Male
License Number: G61521
NPI: 1689646275
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

CHAN, ANDY
License Type: DO
Provider ID: 100419543001
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHAN, ANDY
License Type: DO
Provider ID: 100419543001
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV
License Type: MD
Provider ID: 100287988012
Provider Gender: Male
License Number: A122474
NPI: 1720350465
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV
License Type: MD
Provider ID: 100287988012
Provider Gender: Male
License Number: A122474

C. Red de proveedores de atención primaria

NPI: 1720350465
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHAU, JOHN
License Type: MD
Provider ID: 100391940008
Provider Gender: Male
License Number: A52498
NPI: 1740375070
Provider English Spoken: Y
Provider Language(s) Spoken: Yue Chinese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

CHAU, JOHN
License Type: MD
Provider ID: 100391940008
Provider Gender: Male
License Number: A52498
NPI: 1740375070
Provider English Spoken: Y
Provider Language(s) Spoken: Yue Chinese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

CHEN, JAMES
License Type: MD
Provider ID: 100095895007
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHEN, JAMES
License Type: MD
Provider ID: 100095895007
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CSAPOCZI, PETER
License Type: MD
Provider ID: 100187372007
Provider Gender: Male
License Number: A96919
NPI: 1841357118
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM

INTERNAL MEDICINE

CSAPOCZI, PETER
License Type: MD
Provider ID: 100187372007
Provider Gender: Male
License Number: A96919
NPI: 1841357118
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM

INTERNAL MEDICINE

CUMMINS, ANDREW
License Type: MD
Provider ID: 100015743017
Provider Gender: Male
License Number: A102764
NPI: 1699917096
Provider English Spoken: Y

C. Red de proveedores de atención primaria

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CUMMINS, ANDREW
License Type: MD
Provider ID: 100015743017
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
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DAHMS, ERIC
License Type: MD
Provider ID: 100010664005
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DAHMS, ERIC
License Type: MD
Provider ID: 100010664005
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DAHMS, ERIC
License Type: MD
Provider ID: 100010664005
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: No
FAMILY HEALTH CENTERS OF

C. Red de proveedores de atención primaria

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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DIEP, KEVIN
License Type: DO
Provider ID: 100376039004
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DIEP, KEVIN
License Type: DO
Provider ID: 100376039004
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DODGE, JOHN
License Type: MD
Provider ID: 100025699006
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

INTERNAL MEDICINE

DODGE, JOHN

License Type: MD

Provider ID: 100025699006

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: 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: WC

- *Hours: M-TH 8AM-9PM F 8AM-5PM*

INTERNAL MEDICINE

EL-GHONEIMY, AHMED

License Type: MD

Provider ID: 100103500017

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: 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

INTERNAL MEDICINE

EL-GHONEIMY, AHMED

License Type: MD

Provider ID: 100103500017

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: 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

INTERNAL MEDICINE

FRENETTE, CATHERINE

License Type: MD

Provider ID: 100035924018

Provider Gender: Female

License Number: A80461

NPI: 1417935081

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

FRENETTE, CATHERINE
License Type: MD
Provider ID: 100035924018
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

GEHR, MARC
License Type: MD
Provider ID: 100025139006
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

GEHR, MARC
License Type: MD
Provider ID: 100025139006
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: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE

C. Red de proveedores de atención primaria

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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

GERWER, JOHANNA
License Type: MD
Provider ID: 100398013002
Provider Gender: Female
License Number: A169752
NPI: 1043742588
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

INTERNAL MEDICINE

GERWER, JOHANNA
License Type: MD
Provider ID: 100398013002
Provider Gender: Female
License Number: A169752
NPI: 1043742588
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

INTERNAL MEDICINE

HAN, PAUL
License Type: MD
Provider ID: 100172130007
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HAN, PAUL
License Type: MD
Provider ID: 100172130007
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HAZELBAKER, PAUL
License Type: DO
Provider ID: 100069413006
Provider Gender: Male
License Number: 20A7147
NPI: 1831106103
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

HAZELBAKER, PAUL
License Type: DO
Provider ID: 100069413006
Provider Gender: Male
License Number: 20A7147
NPI: 1831106103
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

HENDERSON, PHILIP
License Type: MD
Provider ID: 100334998001
Provider Gender: Male
License Number: A140324
NPI: 1447678834
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HENDERSON, PHILIP
License Type: MD

C. Red de proveedores de atención primaria

Provider ID: 100334998001
Provider Gender: Male
License Number: A140324
NPI: 1447678834
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE
License Type: MD
Provider ID: 100009035002
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE
License Type: MD
Provider ID: 100009035002
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

JABRI, ZAIN
License Type: MD
Provider ID: 100357195021
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, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR

MEDICAL CENTER, PALOMAR MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

JABRI, ZAIN
License Type: MD
Provider ID: 100357195021
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, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

JACKSON, GAVIN
License Type: MD
Provider ID: 100342526001
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

JACKSON, GAVIN
License Type: MD
Provider ID: 100342526001
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

C. Red de proveedores de atención primaria

Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

JAMISON, KAREN
License Type: MD
Provider ID: 100061915005
Provider Gender: Female
License Number: A95356
NPI: 1285830505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

JAMISON, KAREN
License Type: MD
Provider ID: 100061915005
Provider Gender: Female
License Number: A95356
NPI: 1285830505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

KARCHES, KELLI
License Type: MD
Provider ID: 100133605006
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: 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: WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

INTERNAL MEDICINE

KARCHES, KELLI
License Type: MD
Provider ID: 100133605006
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

KHANNA, POORNIMA
License Type: MD
Provider ID: 100334522004
Provider Gender: Female
License Number: A70714
NPI: 1598862583
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

KHANNA, POORNIMA
License Type: MD
Provider ID: 100334522004
Provider Gender: Female
License Number: A70714
NPI: 1598862583
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

KRIJGER, LISA
License Type: MD
Provider ID: 100026606002
Provider Gender: Female
License Number: A67762
NPI: 1932278710
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA
License Type: MD
Provider ID: 100026606002
Provider Gender: Female
License Number: A67762
NPI: 1932278710
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 100291908014
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: 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: P, EB, IB, E, R, T, WC, ME

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 100291908014
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: 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: P, EB, IB, E, R, T, WC, ME

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 100291908014
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: No
FAMILY HEALTH CENTERS OF

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 100291908014
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: 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: P, EB, IB, E, R, T, WC, ME

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 100067581006
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 100067581006
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

MARQUARDT, DIANA
License Type: MD
Provider ID: 100216050002
Provider Gender: Female
License Number: G44220
NPI: 1114909454
Provider English Spoken: Y
Provider Language(s)

C. Red de proveedores de atención primaria

Spoken: French, German, Spanish
Cultural Competency: N
Board Certified: Yes
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: WC
Hours: M-F 8AM-5PM
SA 8AM-2PM

INTERNAL MEDICINE

MARQUARDT, DIANA
License Type: MD
Provider ID: 100216050002
Provider Gender: Female
License Number: G44220
NPI: 1114909454
Provider English Spoken: Y
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: N
Board Certified: Yes
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: WC
Hours: M-F 8AM-5PM
SA 8AM-2PM

INTERNAL MEDICINE

MCFARLAND, NATHAN
License Type: MD
Provider ID: 100216268014
Provider Gender: Male
License Number: A75411
NPI: 1265462196
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

MCFARLAND, NATHAN
License Type: MD
Provider ID: 100216268014
Provider Gender: Male
License Number: A75411
NPI: 1265462196
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 100334564005
Provider Gender: Male

C. Red de proveedores de atención primaria

License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 100334564005
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 100334564004
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 100334564005
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 100334564005
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

C. Red de proveedores de atención primaria

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

INTERNAL MEDICINE

NARANJO, RODRIGO

License Type: MD

Provider ID: 100334564005

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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

INTERNAL MEDICINE

NARANJO, RODRIGO

License Type: MD

Provider ID: 100334564004

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

NARAYANAN, MEENA

License Type: MD

Provider ID: 100179123006

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: 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: P, EB, IB, E, R, T, WC, ME

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

INTERNAL MEDICINE

NARAYANAN, MEENA

License Type: MD

Provider ID: 100179123006

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,

C. Red de proveedores de atención primaria

Adventist Health and Rideout
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 100344664007
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 100344664007
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

RAMERS, CHRISTIAN
License Type: MD
Provider ID: 100378305001
Provider Gender: Male
License Number: A119631
NPI: 1730381385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

RAMERS, CHRISTIAN
License Type: MD
Provider ID: 100378305001
Provider Gender: Male
License Number: A119631
NPI: 1730381385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

RESNIKOFF, PAMELA
License Type: MD
Provider ID: 100086226002
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

RESNIKOFF, PAMELA
License Type: MD
Provider ID: 100086226002
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

RIVERA, TANIA
License Type: MD
Provider ID: 100200789015
Provider Gender: Female
License Number: A126958

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1336346972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

RIVERA, TANIA
License Type: MD
Provider ID: 100200789015
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050012
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 100246050012
Provider Gender: Male
License Number: C55979
NPI: 1740254713
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

INTERNAL MEDICINE

TESSIER, ADLA
License Type: MD
Provider ID: 100077390011
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: 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

INTERNAL MEDICINE

TESSIER, ADLA
License Type: MD
Provider ID: 100077390011
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: 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

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI
License Type: MD
Provider ID: 100332696012
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

C. Red de proveedores de atención primaria

N

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

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

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

License Type: MD

Provider ID: 100332696012

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: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.opsam.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

License Type: MD

Provider ID: 100378349001

Provider Gender: Female

License Number: A169207

NPI: 1346628310

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: WC

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

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

License Type: MD

Provider ID: 100378349001

Provider Gender: Female

License Number: A169207

NPI: 1346628310

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: WC

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

INTERNAL MEDICINE

WASTILA, LISA

License Type: MD

Provider ID: 100077932009

Provider Gender: Female

License Number: A60801

NPI: 1043375231

Provider English Spoken: Y

Provider Language(s) Spoken: German

C. Red de proveedores de atención primaria

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: 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: EB, IB, E

INTERNAL MEDICINE

WASTILA, LISA
License Type: MD
Provider ID: 100077932009
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: 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: EB, IB, E

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP
License Type: MD
Provider ID: 100417244007
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Hospital Affiliation: SUTTER SOLANO MED CTR
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP
License Type: MD
Provider ID: 100417244007
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Hospital Affiliation: SUTTER SOLANO MED CTR
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

WATTS, ELI
License Type: MD
Provider ID: 100384223004
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: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

WATTS, ELI
License Type: MD
Provider ID: 100384223004
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: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

YUNG, STEVEN
License Type: MD
Provider ID: 100013980008
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: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

YUNG, STEVEN
License Type: MD
Provider ID: 100013980008
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

C. Red de proveedores de atención primaria

Board Certified: 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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,
Provider ID: PG0005427168
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: WC
Hours: M-F 8AM-5PM

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,
Provider ID: PG0005427167
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: WC

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER
License Type: MD
Provider ID: 100390487014
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, SHARP CHULA VISTA MED CTR
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER
License Type: MD
Provider ID: 100390487014
Provider Gender: Female
License Number: A172929
NPI: 1679008569
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 100008281005
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 100008281005
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 100008281005
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

C. Red de proveedores de atención primaria

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 100008281005
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208008
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208015
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208006
Provider Gender: Female
License Number: A68463
NPI: 1376663831

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208008
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208011
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100061208009
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: 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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208008
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: 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: P, EB, IB, E, R, T, WC, ME*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208015
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: 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: P, EB, IB, E, R, T, WC, ME*

C. Red de proveedores de atención primaria

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 100061208008
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: 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: P, EB, IB, E, R, T, WC, ME*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 100061208006
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: 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: P, EB, IB, E, WC, ME*
- *Hours: M-F 8AM-5:30PM SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 100061208011
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: 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: P, EB, IB, E, R,*

T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208009
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630005
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: 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: P, EB, IB, E, R,

T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630006

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311008
Provider Gender: Male
License Number: A108228
NPI: 1629277322
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp

C. Red de proveedores de atención primaria

Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311003
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311006
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311005
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 100378311008
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 100378311003
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 100378311005
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 100378311006
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484003
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: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484008
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F

8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD

Provider ID: 100395484003

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: 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: P, EB, IB, E, WC, ME

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD

Provider ID: 100395484008

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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

License Type: MD

Provider ID: 100342373010

Provider Gender: Female

License Number: C159737

NPI: 1326243833

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: French, Portuguese, Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, RIVERSIDE COMMUNITY HOSP, HOAG HOSPITAL IRVINE

Board Certified: 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: P, EB, IB, E, WC, ME

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

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

License Type: MD

Provider ID: 100342373010

C. Red de proveedores de atención primaria

Provider Gender: Female
License Number: C159737
NPI: 1326243833
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: French, Portuguese, Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, RIVERSIDE COMMUNITY HOSP, HOAG HOSPITAL IRVINE
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
License Type: MD
Provider ID: 100399307005
Provider Gender: Male
License Number: G63543
NPI: 1235218439
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
License Type: MD
Provider ID: 100399307005
Provider Gender: Male
License Number: G63543
NPI: 1235218439
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
License Type: MD
Provider ID: 100399307005
Provider Gender: Male
License Number: G63543
NPI: 1235218439
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
License Type: MD
Provider ID: 100399307005
Provider Gender: Male
License Number: G63543
NPI: 1235218439
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100387235003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235006
Provider Gender: Female
License Number: C174771
NPI: 1053392035
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

KOCOL, DUSTIN
License Type: MD
Provider ID: 100453523002
Provider Gender: Male
License Number: A191425
NPI: 1487141586
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: DESERT REGIONAL MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

KOCOL, DUSTIN
License Type: MD
Provider ID: 100453523002
Provider Gender: Male
License Number: A191425
NPI: 1487141586
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: DESERT REGIONAL MED CTR
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432002
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432005
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432011
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432008
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432006
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432005
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: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432011
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432002
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432006
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 100334432008
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI
License Type: MD
Provider ID: 100351682001
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI
License Type: MD
Provider ID: 100351682001
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844)

C. Red de proveedores de atención primaria

200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343005
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 100362343008

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: 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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-TH 8AM-5PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 100362343003

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: 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: P, EB, IB, E, WC, ME*
- *Hours: M-F 8AM-5:30PM SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 100362343006

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: 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: P, EB, IB, E, R, T, WC*
- *Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD

Provider ID: 100362343005

Provider Gender: Female

License Number: A164859

NPI: 1952751711

- *Provider English Spoken: Y*
- *Provider Language(s)*

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023007
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023009
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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

C. Red de proveedores de atención primaria

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023010
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023007
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023012
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023010
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023009
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023012
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

TARSA, MARYAM
License Type: MD
Provider ID: 100114119055
Provider Gender: Female
License Number: A69894
NPI: 1295768638
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD MEDICAL CTR,

C. Red de proveedores de atención primaria

EISENHOWER MEDICAL CTR
Board Certified: 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
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

TARSA, MARYAM
License Type: MD
Provider ID: 100114119055
Provider Gender: Female
License Number: A69894
NPI: 1295768638
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR
Board Certified: 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
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-2PM

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
License Type: DO
Provider ID: 100087298016
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
License Type: DO
Provider ID: 100087298016
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

YADAV, GHANSHYAM
License Type: MD
Provider ID: 100472370001
Provider Gender: Male
License Number: A176426
NPI: 1962992974
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

YADAV, GHANSHYAM
License Type: MD
Provider ID: 100472370001
Provider Gender: Male
License Number: A176426
NPI: 1962992974
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195012
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: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195009
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195012
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195004
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,

C. Red de proveedores de atención primaria

SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195017
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195004
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,

C. Red de proveedores de atención primaria

SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195009
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195004
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195017
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

C. Red de proveedores de atención primaria

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195004
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: 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: P, EB, IB, E, R, T, WC, ME

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

ABELL, GEOFFREY
License Type: MD
Provider ID: 100029002006
Provider Gender: Male
NPI: 1245256130
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

C. Red de proveedores de atención primaria

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: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

ABRAMSON, RACHEL
License Type: MD
Provider ID: 100002069003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

ABRAMSON, RACHEL
License Type: MD
Provider ID: 100002069003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

ADJAN, ROULA
License Type: MD
Provider ID: 100156045002
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French,

C. Red de proveedores de atención primaria

Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

ADJAN, ROULA
License Type: MD
Provider ID: 100156045002
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

ADLOUNI, LOUBABA
License Type: MD
Provider ID: 100035676009
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS
License Type: MD
Provider ID: 100393709001
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: 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

C. Red de proveedores de atención primaria

American Sign Language (ASL): N

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

Hours: M-TH 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS

License Type: MD

Provider ID: 100393709001

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: 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: P, EB, IB, E, R, T, WC, ME

Hours: M-TH 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS

License Type: MD

Provider ID: 100393709006

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: 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: P, EB, IB, E, R, T, WC, ME

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

PEDIATRICS

ALBINO, NICHOLAS

License Type: MD

Provider ID: 100393709006

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: 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: P, EB, IB, E, R, T, WC, ME

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

PEDIATRICS

ALLSUP, VICTORIA

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100417605011
Provider Gender: Female
License Number: A187106
NPI: 1437786944
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

ALLSUP, VICTORIA
License Type: MD
Provider ID: 100417605011
Provider Gender: Female
License Number: A187106
NPI: 1437786944
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

ANDREE, GREGOR
License Type: MD
Provider ID: 100216073004
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100216073002
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

ANDREE, GREGOR
License Type: MD
Provider ID: 100216073004
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100216073002
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

ARCHAMBAULT, CHRISTIAN
License Type: MD
Provider ID: 100006872010
Provider Gender: Male
NPI: 1992776918
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, CHILDRENS HOSPITAL OF ORANGE COUNTY, PARADISE VALLEY HOSPITAL, PARADISE VALLEY HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

924-1960
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

PEDIATRICS

AWDYKOVYCH, MARTA
License Type: MD
Provider ID: 100020848010
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

AWDYKOVYCH, MARTA
License Type: MD
Provider ID: 100020848010
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

AYSON, NICOLE
License Type: MD
Provider ID: 100293388009
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: 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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

AYSON, NICOLE

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100293388009
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: 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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

AZIMI, AYSUN
License Type: DO
Provider ID: 100251010018
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: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

CASTELNOVI, CLAUDIA
License Type: MD
Provider ID: 100156076010
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

CASTELNOVI, CLAUDIA

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100156076010
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

CHEN, EILEEN
License Type: MD
Provider ID: 100396871003
Provider Gender: Female
NPI: 1932660966
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

CHEN, JENNIFER
License Type: MD
Provider ID: 100323987005
Provider Gender: Female
License Number: A141057
NPI: 1255785150
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

CHEN, JENNIFER
License Type: MD
Provider ID: 100323987005
Provider Gender: Female
License Number: A141057
NPI: 1255785150
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462007
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 100220462007
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

CORDES, WILLIAM
License Type: DO
Provider ID: 100334345001
Provider Gender: Male
License Number: 20A15743
NPI: 1174942544
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

N

Accessibility: P, EB, IB, E, WC, ME

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

PEDIATRICS

CORDES, WILLIAM

License Type: DO

Provider ID: 100334345001

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: 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: P, EB, IB, E, WC, ME

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

PEDIATRICS

DIXON, SARAH

License Type: MD

Provider ID: 100334866003

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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: 100334866003

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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: 100009723010

Provider Gender: Female

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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
Hours: M-F 8AM-5PM

PEDIATRICS

FORTUNE, ERIN
License Type: MD
Provider ID: 100334619003
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: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

FORTUNE, ERIN
License Type: MD
Provider ID: 100334619001
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

FORTUNE, ERIN
License Type: MD
Provider ID: 100334619001
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,

C. Red de proveedores de atención primaria

GROSSMONT HOSPITAL
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

FORTUNE, ERIN
License Type: MD
Provider ID: 100334619003
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: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

FRIEDMAN, JAIME
License Type: MD
Provider ID: 100026797010
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

GOGGIN, SAMANTHA
License Type: MD
Provider ID: 100394198001
Provider Gender: Female
License Number: A163693
NPI: 1023506367
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Hours: M-F 8AM-5PM

PEDIATRICS

GOGGIN, SAMANTHA
License Type: MD
Provider ID: 100394198001
Provider Gender: Female
License Number: A163693
NPI: 1023506367
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

GRAY, SARAH
License Type: MD
Provider ID: 100374056003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

GRAY, SARAH
License Type: MD
Provider ID: 100374056003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

GUPTA, VARSHA
License Type: MD
Provider ID: 100378228006
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

C. Red de proveedores de atención primaria

Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

GUPTA, VARSHA
License Type: MD
Provider ID: 100378228006
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

GUTIERREZ, BLANCA
License Type: MD
Provider ID: 100459294004
Provider Gender: Female
NPI: 1326543984
Provider English Spoken: Y
Provider Language(s) Spoken: Polish, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Board Certified: 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
Hours: M-TH 8AM-8PM F 8AM-5PM

PEDIATRICS

HENDERSON, TREVOR
License Type: MD
Provider ID: 100061136010
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: No
RADY CHILDRENS HEALTH

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

PEDIATRICS

HIBBS, NICOLE
License Type: MD
Provider ID: 100144076005
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: 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: P, EB, IB, E, R, T, WC
Hours: M-TH 8AM-8:30PM
F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

JORDAN, JAMIE
License Type: MD
Provider ID: 100168024014
Provider Gender: Female
NPI: 1275762833
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

JUAREZ, PATRICIA
License Type: MD
Provider ID: 100079145016
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: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

PEDIATRICS

KARMAKAR, KANKA
License Type: MD
Provider ID: 100333852001
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PEDIATRICS

KARMAKAR, KANKA
License Type: MD
Provider ID: 100333852001
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: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.opsam.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PEDIATRICS

KESANAPALLI, DEEPTHI
License Type: MD
Provider ID: 100216862006
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-TH 8:30AM-6PM F 8:30AM-12PM

PEDIATRICS

LAWRIE, ALISA
License Type: MD
Provider ID: 100089721008
Provider Gender: Female
NPI: 1407847908
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
Phone: (619) 297-4567
After Hours Phone: (619) 297-4567
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-TH 8AM-8PM F 8AM-5PM

PEDIATRICS

LE, NGUYEN
License Type: MD
Provider ID: 100047045007
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: No
RADY CHILDRENS HEALTH NETWORK
5507 EL CAJON BLVD STE B
SAN DIEGO, CA 92115
Phone: (619) 582-8814
Fax: (619) 582-8813
After Hours Phone: (619) 582-8814
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 9AM-5PM

PEDIATRICS

LOPER, KAREN
License Type: MD
Provider ID: 100043893011
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hours: M-F 8AM-5PM

PEDIATRICS

LUJAN, ARLEEN
License Type: MD
Provider ID: 100076568002
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

LUJAN, ARLEEN
License Type: MD
Provider ID: 100076568002
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

MADANY, GEORGE
License Type: MD
Provider ID: 100038565015
Provider Gender: Male
NPI: 1811968837
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

MAHENDRAN, SRIVIDYA
License Type: MD
Provider ID: 100111182006
Provider Gender: Female
License Number: A92173

NPI: 1487843454
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MAHENDRAN, SRIVIDYA
License Type: MD
Provider ID: 100111182006
Provider Gender: Female
License Number: A92173
NPI: 1487843454
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA
License Type: MD
Provider ID: 100112434033
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA
License Type: MD
Provider ID: 100112434033
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: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155

C. Red de proveedores de atención primaria

Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM

PEDIATRICS

MARTINEZ-ANDREE, INGRID
License Type: MD
Provider ID: 100078084007
Provider Gender: Female
NPI: 1205807203
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, JANICE
License Type: MD
Provider ID: 100361667001
Provider Gender: Female
License Number: A157335
NPI: 1760916589
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

PEDIATRICS

NGUYEN, JANICE
License Type: MD
Provider ID: 100361667001
Provider Gender: Female
License Number: A157335
NPI: 1760916589
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

PEDIATRICS

PARK, TARI
License Type: MD
Provider ID: 100076371014
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

PAVLOVICH, WENDY
License Type: MD
Provider ID: 100316971003
Provider Gender: Female
License Number: A126181
NPI: 1740467299
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

PAVLOVICH, WENDY
License Type: MD
Provider ID: 100316971003
Provider Gender: Female
License Number: A126181
NPI: 1740467299
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

POWELL, STEPHANIE
License Type: MD
Provider ID: 100108002008
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: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

PEDIATRICS

PRESKILL, CATALINA
License Type: MD
Provider ID: 100334606002
Provider Gender: Female
License Number: G29879
NPI: 1598088759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

PEDIATRICS

PRESKILL, CATALINA
License Type: MD
Provider ID: 100334606002
Provider Gender: Female
License Number: G29879
NPI: 1598088759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: EB, IB, E
Hours: M-F 8AM-5:30PM

PEDIATRICS

RODRIGUEZ, JAVIER
License Type: MD
Provider ID: 100177982007
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

RODRIGUEZ, JAVIER
License Type: MD
Provider ID: 100177982010
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

PEDIATRICS

RODRIGUEZ, JAVIER
License Type: MD
Provider ID: 100177982007
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

RODRIGUEZ, JAVIER
License Type: MD
Provider ID: 100177982010
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

PEDIATRICS

RUBENSTEIN, STUART
License Type: MD
Provider ID: 100069429006
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: 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
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

SAMPATH, SRIVIDYA
License Type: MD
Provider ID: 100344400006
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

C. Red de proveedores de atención primaria

Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SAMPATH, SRIVIDYA
License Type: MD
Provider ID: 100344400006
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SEBSO, JODI
License Type: MD
Provider ID: 100334338004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SEBSO, JODI
License Type: MD
Provider ID: 100334338004
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: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

SEBSO, JODI
License Type: MD
Provider ID: 100334338004
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: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

N

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

PEDIATRICS

SEBSO, JODI

License Type: MD

Provider ID: 100334338001

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: 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: P, EB, IB, E, WC, ME

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

PEDIATRICS

SEBSO, JODI

License Type: MD

Provider ID: 100334338001

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: 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: P, EB, IB, E, WC, ME

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

PEDIATRICS

SHENOY, ASHVIN

License Type: MD

Provider ID: 100214931011

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: 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: EB, IB, E, R, WC

Hours: M-F 8AM-5PM

PEDIATRICS

SHETH, HASMUKH

License Type: MD

C. Red de proveedores de atención primaria

Provider ID: 100086748008
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SHETH, HASMUKH
License Type: MD
Provider ID: 100086748008
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SHIAU, NANCY
License Type: MD
Provider ID: 100042800008
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: 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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 100314988001
Provider Gender: Female
License Number: A76785
NPI: 1851323315
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

C. Red de proveedores de atención primaria

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 100314988003
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: 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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 100314988002
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 100314988001
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: No
FAMILY HEALTH CENTERS OF SAN DIEGO

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 100314988003
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: 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: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 100314988002
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: 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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

PEDIATRICS

SUBRAMANIAN, RAMA
License Type: MD
Provider ID: 100397060006
Provider Gender: Female
NPI: 1932593506
Provider English Spoken: Y
Provider Language(s) Spoken: Tamil
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

SA 8AM-12PM

PEDIATRICS

SULEIMAN-QAFITI, KHAWLA
License Type: MD
Provider ID: 100069156003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

PEDIATRICS

SULEIMAN-QAFITI, KHAWLA
License Type: MD
Provider ID: 100069156003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8AM-5PM

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 100185583008
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: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 100185583008
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: 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: P, EB, IB, E, R, T, WC, ME

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 100185583003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 100185583003
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: 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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

PEDIATRICS

WASSON, MINA
License Type: MD
Provider ID: 100361900007
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

C. Red de proveedores de atención primaria

Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

WATERS, ELIZABETH
License Type: MD
Provider ID: 100167825006
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: 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: EB, IB, E, R, WC
Hours: M-F 8AM-5PM

PEDIATRICS

WEATHERLY, JACOB
License Type: MD
Provider ID: 100346707009
Provider Gender: Male
NPI: 1538520457
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care
Board Certified: 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
Hours: M-F 8AM-5PM SA 8:30AM-12PM

PEDIATRICS

WONG, IAN
License Type: DO
Provider ID: 100440680004
Provider Gender: Male
NPI: 1174152128
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

WONG, YOLANDA
License Type: MD
Provider ID: 100216067018
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: 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: P, EB, IB, E, R, T, WC
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: 100216067018
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: 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: P, EB, IB, E, R, T, WC
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: 100088317011
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

ZAHEER, AARON
License Type: MD
Provider ID: 100088317007
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: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM SA 8AM-2PM

PEDIATRICS

ZAHEER, AARON
License Type: MD
Provider ID: 100088317011
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

ZAHEER, AARON
License Type: MD
Provider ID: 100088317007
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: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM SA 8AM-2PM

SAN MARCOS

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA

C. Red de proveedores de atención primaria

License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 100244430004
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

C. Red de proveedores de atención primaria

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 100240126013
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE
License Type: DO
Provider ID: 100333576012
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086044
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
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086044
NPI: 1811617939
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
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086044
NPI: 1598484255
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
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: P, EB, IB, E, R,

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FQHC

TRUECARE,
Provider ID: PG0025086044
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
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086044
NPI: 1811617939
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
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086044
NPI: 1598484255
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
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086048
NPI: 1598484255
Provider English Spoken: Y
Cultural Competency: N
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
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086048
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086048
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
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
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086048
NPI: 1598484255
Provider English Spoken: Y
Cultural Competency: N
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
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086048
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
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
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: PG0025086048
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
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
Hours: M-F 8AM-5PM

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 100036527003
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: No
IHP OF SOUTHERN CAL-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 100036527003
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: 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: P, EB, IB, E, R, T, WC

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 100036527003
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: 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: P, EB, IB, E, R, T, WC

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 100036527003
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: 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: P, EB, IB, E, R, T, WC

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider ID: 100036527003
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: 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: P, EB, IB, E, R, T, WC

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 100036527003
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: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 100099164003
Provider Gender: Male
License Number: G74757
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 100099164003
Provider Gender: Male
License Number: G74757
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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):

C. Red de proveedores de atención primaria

N

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

INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD

Provider ID: 100099164003

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD

Provider ID: 100099164003

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD

Provider ID: 100099164003

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD

Provider ID: 100099164003

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

INTERNAL MEDICINE

PONIACHIK, SAMUEL

License Type: MD

Provider ID: 100099164003

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

N

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

INTERNAL MEDICINE

RUSSELL, MARIE

License Type: MD

Provider ID: 100381539004

Provider Gender: Female

License Number: C168165

NPI: 1609947449

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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

INTERNAL MEDICINE

RUSSELL, MARIE

License Type: MD

Provider ID: 100381539004

Provider Gender: Female

License Number: C168165

NPI: 1609947449

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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

INTERNAL MEDICINE

RUSSELL, MARIE

License Type: MD

Provider ID: 100381539004

Provider Gender: Female

License Number: C168165

NPI: 1609947449

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC

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

INTERNAL MEDICINE

RUSSELL, MARIE

License Type: MD

Provider ID: 100381539004

Provider Gender: Female

License Number: C168165

NPI: 1609947449

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

C. Red de proveedores de atención primaria

Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

INTERNAL MEDICINE

RUSSELL, MARIE
License Type: MD
Provider ID: 100381539004
Provider Gender: Female
License Number: C168165
NPI: 1609947449
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

INTERNAL MEDICINE

RUSSELL, MARIE
License Type: MD
Provider ID: 100381539004
Provider Gender: Female
License Number: C168165
NPI: 1609947449
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN
License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN
License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN
License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN
License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN
License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN
License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CONROY, ERIN

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100385858003
Provider Gender: Female
License Number: A142909
NPI: 1669731329
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH UKIAH VALLEY
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD
Provider ID: 100149393018
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD
Provider ID: 100149393018
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD
Provider ID: 100149393018
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
License Type: MD
Provider ID: 100149393018
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
License Type: MD
Provider ID: 100149393018
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
License Type: MD
Provider ID: 100149393018
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 100175467003
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

C. Red de proveedores de atención primaria

POUNTNEY, MARLENE
License Type: MD
Provider ID: 100000915006
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 100000915006
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 100000915006
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 100000915006
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 100000915006
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: 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: P, EB, IB, E, R, T, WC

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 100000915006
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189003

C. Red de proveedores de atención primaria

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

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189006
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: No
RADY CHILDRENS HEALTH NETWORK
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 100114189003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

MONAHAN, CAROLYN
License Type: MD
Provider ID: 100053089011
Provider Gender: Female
NPI: 1619973666
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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: WC
Hours: M-F 8AM-4PM

PEDIATRICS

NEVES, VANESSA
License Type: MD
Provider ID: 100143659019
Provider Gender: Female

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1174672547
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6797
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552007
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552003
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: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD

C. Red de proveedores de atención primaria

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

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 100070552003

C. Red de proveedores de atención primaria

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

PEDIATRICS

QUINTERO, CAROLYN
License Type: MD
Provider ID: 100063462013
Provider Gender: Female
NPI: 1023033156
Provider English Spoken: Y
Provider Language(s) Spoken: Afar, Spanish
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-6PM SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM

PEDIATRICS

C. Red de proveedores de atención primaria

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 100440963007
Provider Gender: Male
License Number: A192535
NPI: 1558942193
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

C. Red de proveedores de atención primaria

SEBIANE, MARIA
License Type: MD
Provider ID: 100066520003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 100066520003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 100066520003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 100066520003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 100066520003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 100066520003
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: 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: P, EB, IB, E, R, T, WC

PEDIATRICS

SOCHA, TRACI
License Type: DO
Provider ID: 100024479013
Provider Gender: Female
NPI: 1669478616
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: 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: WC

C. Red de proveedores de atención primaria

Hours: M-F 8AM-4:45PM

SAN YSIDRO

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 100360099004

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: 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: WC

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

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 100360099003

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: 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: WC

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 100360099004

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: 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: WC

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

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

License Type: MD

Provider ID: 100360099003

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: WC

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 100214881009
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 100214881009
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

BORSAN, COSMIN
License Type: DO
Provider ID: 100375856004
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Board Certified: 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: WC

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

FAMILY PRACTICE

BORSAN, COSMIN

License Type: DO
Provider ID: 100375856004
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

CAMPOS, MELISSA

License Type: MD
Provider ID: 100334357010
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: 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: WC

FAMILY PRACTICE

CAMPOS, MELISSA

License Type: MD
Provider ID: 100334357010
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: 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: WC

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD
Provider ID: 100066452003
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

C. Red de proveedores de atención primaria

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: WC

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 100066452003
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

CASTILLO, STEPHANIE
License Type: MD
Provider ID: 100373750003
Provider Gender: Female
License Number: A159673
NPI: 1902330723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

CASTILLO, STEPHANIE
License Type: MD
Provider ID: 100373750003
Provider Gender: Female
License Number: A159673
NPI: 1902330723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

CHOU, SUSANNA
License Type: MD
Provider ID: 100054762012
Provider Gender: Female
License Number: A73158
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
Board Certified: No

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

CHOU, SUSANNA
License Type: MD
Provider ID: 100054762012
Provider Gender: Female
License Number: A73158
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
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

CONTAG, ALEC
License Type: MD
Provider ID: 100432994007
Provider Gender: Male
License Number: A181369
NPI: 1215495627
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

CONTAG, ALEC
License Type: MD
Provider ID: 100432994007
Provider Gender: Male
License Number: A181369
NPI: 1215495627
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

CONTAG, ALEC
License Type: MD
Provider ID: 100432994007
Provider Gender: Male
License Number: A181369
NPI: 1215495627
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

C. Red de proveedores de atención primaria

N
Accessibility: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 100324282003
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 100324282005
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 100324282003
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173

License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 100324282005
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

DALUGDUGAN, ESTHER

License Type: MD

Provider ID: 100417489004

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: 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: WC

FAMILY PRACTICE

DALUGDUGAN, ESTHER

License Type: MD

Provider ID: 100417489004

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: 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: WC

FAMILY PRACTICE

DAVIS, CHARLES

License Type: MD

Provider ID: 100433314001

Provider Gender: Male

License Number: G41219

NPI: 1194840231

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

DAVIS, CHARLES

License Type: MD

Provider ID: 100433314001

Provider Gender: Male

License Number: G41219

NPI: 1194840231

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

ESTRADA, JOHANNA

License Type: MD

Provider ID: 100294236024

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: 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: WC

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

FAMILY PRACTICE

ESTRADA, JOHANNA

License Type: MD

Provider ID: 100294236024

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: 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: WC

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

FAMILY PRACTICE

KAUFHOLD, ANNE

License Type: MD

Provider ID: 100086435021

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: 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: WC

FAMILY PRACTICE

KAUFHOLD, ANNE

License Type: MD

Provider ID: 100086435021

Provider Gender: Female

License Number: A88893

NPI: 1164508073

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

Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: 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: WC

FAMILY PRACTICE

LEPEZ, DAVID
License Type: MD
Provider ID: 100255267003
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: 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: WC

FAMILY PRACTICE

LEPEZ, DAVID
License Type: MD
Provider ID: 100255267003
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: 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: WC

FAMILY PRACTICE

MANSOUR, SABAH
License Type: MD
Provider ID: 100436982005
Provider Gender: Male
License Number: A177271
NPI: 1194388637
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

MANSOUR, SABAH
License Type: MD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider ID: 100436982005
Provider Gender: Male
License Number: A177271
NPI: 1194388637
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 100099596011
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: 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: WC

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 100099596011
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: 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: WC

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
License Type: MD
Provider ID: 100173914009
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: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
License Type: MD
Provider ID: 100173914009
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: 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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 100238268020
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 100238268020
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ORTEGA, LUIS
License Type: MD
Provider ID: 100394387004
Provider Gender: Male
License Number: A180886

C. Red de proveedores de atención primaria

NPI: 1558924936
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ORTEGA, LUIS
License Type: MD
Provider ID: 100394387004
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

QURESHI, SOFIA
License Type: MD
Provider ID: 100434189005
Provider Gender: Female
License Number: C188057
NPI: 1902197544
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

QURESHI, SOFIA
License Type: MD
Provider ID: 100434189005
Provider Gender: Female
License Number: C188057
NPI: 1902197544
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

QURESHI, SOFIA
License Type: MD
Provider ID: 100434189005
Provider Gender: Female
License Number: C188057
NPI: 1902197544
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

FAMILY PRACTICE

C. Red de proveedores de atención primaria

RAJAIPOUR, NEGIN
License Type: MD
Provider ID: 100300998003
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: 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: WC

FAMILY PRACTICE

RAJAIPOUR, NEGIN
License Type: MD
Provider ID: 100300998011
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN
License Type: MD
Provider ID: 100300998003
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: 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: WC

FAMILY PRACTICE

RAJAIPOUR, NEGIN
License Type: MD
Provider ID: 100300998011
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ROJAS, SARAH
License Type: MD
Provider ID: 100351568004
Provider Gender: Female
License Number: A139169
NPI: 1245645076
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ROJAS, SARAH
License Type: MD
Provider ID: 100351568004
Provider Gender: Female
License Number: A139169
NPI: 1245645076
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

SHAHTAJI, ALAN
License Type: DO
Provider ID: 100174415021
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: 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: WC

FAMILY PRACTICE

SHAHTAJI, ALAN
License Type: DO
Provider ID: 100174415021
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: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD

C. Red de proveedores de atención primaria

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: WC

FAMILY PRACTICE

STALEY, MICHAELA
License Type: MD
Provider ID: 100359422004
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

STALEY, MICHAELA
License Type: MD
Provider ID: 100359422004
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

FAMILY PRACTICE

SWEET, PATRICK
License Type: MD
Provider ID: 100283357020
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

SWEET, PATRICK
License Type: MD
Provider ID: 100283357020
Provider Gender: Male
License Number: A101827
NPI: 1457407702
Provider English Spoken: Y
Cultural Competency: N

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 100334847001
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 100334847001
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TAN, LO FU
License Type: MD
Provider ID: 100433440001
Provider Gender: Male
License Number: C170935
NPI: 1356314835
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

FAMILY PRACTICE

TAN, LO FU

License Type: MD

Provider ID: 100433440001

Provider Gender: Male

License Number: C170935

NPI: 1356314835

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

FAMILY PRACTICE

UTZ, JACK

License Type: MD

Provider ID: 100415591004

Provider Gender: Male

License Number: A183145

NPI: 1194353094

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: WC

FAMILY PRACTICE

UTZ, JACK

License Type: MD

Provider ID: 100415591004

Provider Gender: Male

License Number: A183145

NPI: 1194353094

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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: WC

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: PG0047542009

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: WC

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: PG0047542009

NPI: 1558852947

Provider English Spoken: Y

Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,
Provider ID: PG0047448003
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
Hours: M-F 8AM-8PM
SA 8AM-2PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,
Provider ID: PG0047448003
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
Hours: M-F 8AM-8PM
SA 8AM-2PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,
Provider ID: PG0047560012
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: WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,
Provider ID: PG0047560012
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: WC
Hours: M-F 8AM-5PM

GENERAL PRACTICE

TEJEDA, FRANCISCO

C. Red de proveedores de atención primaria

License Type: MD
Provider ID: 100056654002
Provider Gender: Male
License Number: A66885
NPI: 1407940075
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

GENERAL PRACTICE

TEJEDA, FRANCISCO
License Type: MD
Provider ID: 100056654002
Provider Gender: Male
License Number: A66885
NPI: 1407940075
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 100134749015
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: 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: WC

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 100134749015
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: 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: WC

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 100134749015
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: 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: WC

INTERNAL MEDICINE

C. Red de proveedores de atención primaria

DE LA ROSA, JOSE
License Type: MD
Provider ID: 100357668001
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: 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: WC

INTERNAL MEDICINE

DE LA ROSA, JOSE
License Type: MD
Provider ID: 100357668001
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: 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: WC

INTERNAL MEDICINE

DILLON, BENEDICT
License Type: MD
Provider ID: 100166636005
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: 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: WC

INTERNAL MEDICINE

DILLON, BENEDICT
License Type: MD
Provider ID: 100166636005
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

CHULA VISTA, CHULA VISTA COMM HOSP
Board Certified: 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: WC

INTERNAL MEDICINE

HURST, MICHAEL
License Type: DO
Provider ID: 100033198007
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: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

INTERNAL MEDICINE

HURST, MICHAEL
License Type: DO
Provider ID: 100033198007
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: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

INTERNAL MEDICINE

KAUFER, DAVID
License Type: MD
Provider ID: 100065839025
Provider Gender: Male
License Number: G80107
NPI: 1710082789
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

KAUFER, DAVID
License Type: MD
Provider ID: 100065839025
Provider Gender: Male
License Number: G80107
NPI: 1710082789
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 100067581014
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 100067581014
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

MATHEW, SONIA
License Type: MD
Provider ID: 100470471001
Provider Gender: Female
License Number: A198942
NPI: 1376284562
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

INTERNAL MEDICINE

MATHEW, SONIA
License Type: MD
Provider ID: 100470471001
Provider Gender: Female
License Number: A198942

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

NPI: 1376284562
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 100325305007
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: 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: WC

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 100325305007
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: 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: WC

INTERNAL MEDICINE

OMIWADE, OLUWAPOSI
License Type: MD
Provider ID: 100470536001
Provider Gender: Male
License Number: A190740
NPI: 1255071817
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM SA 8AM-2PM

INTERNAL MEDICINE

OMIWADE, OLUWAPOSI
License Type: MD
Provider ID: 100470536001
Provider Gender: Male
License Number: A190740
NPI: 1255071817

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM

INTERNAL MEDICINE

PATEL, BHAVESH
License Type: DO
Provider ID: 100405829008
Provider Gender: Male
License Number: 20A8240
NPI: 1881778165
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: 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: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM

INTERNAL MEDICINE

PATEL, BHAVESH
License Type: DO
Provider ID: 100405829008
Provider Gender: Male
License Number: 20A8240
NPI: 1881778165
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: 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: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM

INTERNAL MEDICINE

POAST, JENNIFER
License Type: DO
Provider ID: 100066425006
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

POAST, JENNIFER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Type: DO
Provider ID: 100066425006
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA
License Type: MD
Provider ID: 100392011016
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: 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: WC

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA
License Type: MD
Provider ID: 100392011016
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: 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: WC

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA
License Type: MD
Provider ID: 100335002002
Provider Gender: Female
License Number: G81461
NPI: 1821299520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

American Sign Language (ASL): N
Accessibility: WC

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA
License Type: MD
Provider ID: 100335002002
Provider Gender: Female
License Number: G81461
NPI: 1821299520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY
License Type: MD
Provider ID: 100130877033
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: 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: WC
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY
License Type: MD
Provider ID: 100130877033
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: 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: WC
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
License Type: MD
Provider ID: 100075572023
Provider Gender: Male
License Number: G53756
NPI: 1033138714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
License Type: MD
Provider ID: 100075572023
Provider Gender: Male
License Number: G53756
NPI: 1033138714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: 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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA
License Type: MD
Provider ID: 100347686019
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: 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: WC
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA
License Type: MD
Provider ID: 100347686019
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: 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: WC
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA
License Type: MD
Provider ID: 100208115009
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: 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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA
License Type: MD
Provider ID: 100208115009
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: 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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARSON, LATISA
License Type: MD
Provider ID: 100099600013
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: 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: WC

OBSTETRICS / GYNECOLOGY

CARSON, LATISA
License Type: MD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider ID: 100099600013
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: 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: WC

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 100331393006
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 100331393009
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 100331393006
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 100331393009
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: WC

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
License Type: MD
Provider ID: 100394456008
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: 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: WC
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
License Type: MD
Provider ID: 100394456007
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
License Type: MD
Provider ID: 100394456008
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: 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: WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

License Type: MD
Provider ID: 100394456007
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

License Type: MD
Provider ID: 100317720007
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: 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: WC

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

License Type: MD
Provider ID: 100317720007
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: 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: WC

OBSTETRICS / GYNECOLOGY

KOBAYASHI, KAREN

License Type: DO
Provider ID: 100039829022
Provider Gender: Female
License Number: 20A10831
NPI: 1497929517
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

KOBAYASHI, KAREN
License Type: DO
Provider ID: 100039829022
Provider Gender: Female
License Number: 20A10831
NPI: 1497929517
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 100090097006
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: 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: WC

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 100090097006
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

C. Red de proveedores de atención primaria

HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: 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: WC

OBSTETRICS / GYNECOLOGY

MUSINSKI, SCOTT
License Type: MD
Provider ID: 100009700026
Provider Gender: Male
License Number: G85560
NPI: 1447223326
Provider English Spoken: Y
Provider Language(s) Spoken: French, Polish, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

MUSINSKI, SCOTT
License Type: MD
Provider ID: 100009700026
Provider Gender: Male
License Number: G85560
NPI: 1447223326
Provider English Spoken: Y
Provider Language(s) Spoken: French, Polish, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL
Board Certified: 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: WC
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 100088886058
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: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 100088886058
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: 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: WC

PEDIATRICS

ACEVEDO, SUSANA
License Type: MD
Provider ID: 100362410004
Provider Gender: Female
License Number: A74960
NPI: 1801971569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

ACEVEDO, SUSANA
License Type: MD
Provider ID: 100362410004
Provider Gender: Female
License Number: A74960
NPI: 1801971569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

BARBADILLO, FERDINAND
License Type: MD
Provider ID: 100073634005
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: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC

PEDIATRICS

BARBADILLO, FERDINAND
License Type: MD
Provider ID: 100073634005
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: 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: WC

PEDIATRICS

CHAIT LLAMAS, LWBBA
License Type: MD
Provider ID: 100308393005
Provider Gender: Female
License Number: A138938
NPI: 1134567530
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified: 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: WC

PEDIATRICS

CHAIT LLAMAS, LWBBA
License Type: MD
Provider ID: 100308393005
Provider Gender: Female
License Number: A138938
NPI: 1134567530
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified: 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: WC

PEDIATRICS

DOKICH, SRETENKA
License Type: MD
Provider ID: 100113183016
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

C. Red de proveedores de atención primaria

DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

PEDIATRICS

DOKICH, SRETENKA
License Type: MD
Provider ID: 100113183016
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: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

PEDIATRICS

FUJII, CINDY
License Type: MD
Provider ID: 100341421006
Provider Gender: Female
License Number: G52183
NPI: 1871664821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

FUJII, CINDY
License Type: MD
Provider ID: 100341421006
Provider Gender: Female
License Number: G52183
NPI: 1871664821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

HERMAN, ANDREA
License Type: MD
Provider ID: 100092989004
Provider Gender: Female
License Number: A72721
NPI: 1518970037
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: WC

PEDIATRICS

HERMAN, ANDREA
License Type: MD
Provider ID: 100092989004
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: 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: WC

PEDIATRICS

NISSAN, BETI
License Type: MD
Provider ID: 100061019009
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: 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: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PEDIATRICS

NISSAN, BETI
License Type: MD
Provider ID: 100061019009
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: No
IHP OF SOUTHERN CAL-PHP

C. Red de proveedores de atención primaria

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

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 100354595007
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: 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: WC

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 100354595007
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: 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: WC

PEDIATRICS

RUELAS, ROBERTO
License Type: MD
Provider ID: 100363499004
Provider Gender: Male
License Number: A170141
NPI: 1194257386
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

RUELAS, ROBERTO
License Type: MD
Provider ID: 100363499004
Provider Gender: Male
License Number: A170141
NPI: 1194257386
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: WC

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 100022703007
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: 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: WC
Hours: M-F 8AM-7:30PM SA 8:30AM-2PM

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 100022703004
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: 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: WC

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 100022703007
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: 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: WC
Hours: M-F 8AM-7:30PM SA 8:30AM-2PM

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 100022703004
Provider Gender: Male

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: WC

PEDIATRICS

SHAHIDYAZDANI, TINA
License Type: MD
Provider ID: 100324264003
Provider Gender: Female
License Number: A94813
NPI: 1891924858
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

SHAHIDYAZDANI, TINA
License Type: MD
Provider ID: 100324264003
Provider Gender: Female
License Number: A94813
NPI: 1891924858
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

SULLIVAN, ELISSA
License Type: MD
Provider ID: 100362365003
Provider Gender: Female
License Number: A169577
NPI: 1790216422
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8:30AM-5PM

PEDIATRICS

SULLIVAN, ELISSA
License Type: MD
Provider ID: 100362365003
Provider Gender: Female
License Number: A169577
NPI: 1790216422
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Board Certified: 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: WC
Hours: M-F 8:30AM-5PM

PEDIATRICS

TAYLOR, TASHA
License Type: MD
Provider ID: 100100354003
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: 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: WC

PEDIATRICS

TAYLOR, TASHA
License Type: MD
Provider ID: 100100354003
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: 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: WC

SANTEE

FAMILY PRACTICE

BAIOU, MOHAMED
License Type: MD
Provider ID: 100334848004
Provider Gender: Male
License Number: A149492
NPI: 1447542659
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

BAIOU, MOHAMED
License Type: MD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider ID: 100334848004
Provider Gender: Male
License Number: A149492
NPI: 1447542659
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,
Provider ID: PG0094129002
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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,
Provider ID: PG0094129002
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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

ALI, ABBAS
License Type: MD
Provider ID: 100438894006
Provider Gender: Male
License Number: C193913
NPI: 1104200112
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC

INTERNAL MEDICINE

ALI, ABBAS
License Type: MD
Provider ID: 100438894006
Provider Gender: Male
License Number: C193913
NPI: 1104200112
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, WC

INTERNAL MEDICINE

CORBIN, DAVID
License Type: MD
Provider ID: 100378968004
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: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

CORBIN, DAVID
License Type: MD
Provider ID: 100378968004
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: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

PEDIATRICS

ARLATA, TAMANTHA
License Type: MD
Provider ID: 100335848010
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

PEDIATRICS

IKE, ERICA
License Type: DO
Provider ID: 100343272011
Provider Gender: Female
License Number: 20A16603
NPI: 1821413907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOHNS MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

PEDIATRICS

IKE, ERICA
License Type: DO
Provider ID: 100343272011
Provider Gender: Female
License Number: 20A16603
NPI: 1821413907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOHNS MEDICAL CENTER
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM

PEDIATRICS

MANGINE, REGINA
License Type: MD
Provider ID: 100050417007
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: 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: WC
Hours: M-F 8AM-5PM

SPRING VALLEY

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 100378244001
Provider Gender: Female
License Number: 20A15459

C. Red de proveedores de atención primaria

NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 100378244001
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CARDONES, ARTHUR
License Type: MD
Provider ID: 100084576002
Provider Gender: Male
License Number: A55932
NPI: 1962436451
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CARDONES, ARTHUR
License Type: MD
Provider ID: 100084576002
Provider Gender: Male
License Number: A55932
NPI: 1962436451
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CARDONES, ARTHUR
License Type: MD
Provider ID: 100084576002
Provider Gender: Male
License Number: A55932
NPI: 1962436451
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

CONSTANTINO, STEPHANIE
License Type: MD
Provider ID: 100335370003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CONSTANTINO, STEPHANIE
License Type: MD
Provider ID: 100335370003
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA
License Type: MD
Provider ID: 100066408029
Provider Gender: Female
License Number: A76059
NPI: 1588677314
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA
License Type: MD
Provider ID: 100066408029
Provider Gender: Female
License Number: A76059
NPI: 1588677314
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF

C. Red de proveedores de atención primaria

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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,
Provider ID: PG0025044021
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: ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

NARAYANAN, MEENA
License Type: MD
Provider ID: 100179123079
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,
Provider ID: PG0025044021
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: ME
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

NARAYANAN, MEENA
License Type: MD
Provider ID: 100179123079
Provider Gender: Female
License Number: A113448
NPI: 1508170697

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208007
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 100061208007
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 100395630004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311004
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311004
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 100378311004
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 100395484004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 100387235004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

N

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

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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

License Type: MD

Provider ID: 100387235004

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: 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: P, EB, IB, E, R, T, WC, ME

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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD

Provider ID: 100334432001

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: 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: P, EB, IB, E, R, T, WC, ME

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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD

Provider ID: 100334432001

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: 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: P, EB, IB, E, R, T, WC, ME

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

T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 100362343004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023008
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 100332023008
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y

C. Red de proveedores de atención primaria

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 100040195008
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JI, AMANDA
License Type: MD
Provider ID: 100363243004
Provider Gender: Female
License Number: A169342
NPI: 1750745493
Provider English Spoken: Y
Provider Language(s)

C. Red de proveedores de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JI, AMANDA
License Type: MD
Provider ID: 100363243004
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD HEALTHCARE,
Provider ID: PG0024990062
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: WC
Hours: M-F 8AM-5PM

CLINIC OUTPATIENT

NEIGHBORHOOD HEALTHCARE,
Provider ID: PG0024990062
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: WC
Hours: M-F 8AM-5PM

FAMILY PRACTICE

AYON MARTINEZ, CARLOS
License Type: MD
Provider ID: 100152029009
Provider Gender: Male
License Number: A114419
NPI: 1154583128

C. Red de proveedores de atención primaria

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

FAMILY PRACTICE

AYON MARTINEZ, CARLOS
License Type: MD
Provider ID: 100152029009
Provider Gender: Male
License Number: A114419
NPI: 1154583128
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: WC
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE,
Provider ID: PG0024990062
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: WC
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE,
Provider ID: PG0024990062
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: WC
Hours: M-F 8AM-5PM

PEDIATRICS

CRAYCHEE, LEO
License Type: MD
Provider ID: 100075122004
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: No
RADY CHILDRENS HEALTH NETWORK
28714 VALLEY CENTER RD
STE L

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

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
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8:30AM-5PM

VISTA

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 100358800006
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 100358800006
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 100248366031
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: 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: P, EB, IB, E, R,

C. Red de proveedores de atención primaria

T, WC, ME

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

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 100248366031

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: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

License Type: DO

Provider ID: 100464747008

Provider Gender: Male

License Number: 20A23095

NPI: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: P, EB, IB, E, R, T, WC, ME

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

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

License Type: DO

Provider ID: 100464747009

Provider Gender: Male

License Number: 20A23095

NPI: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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: WC

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

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

License Type: DO

Provider ID: 100464747008

Provider Gender: Male

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
License Type: DO
Provider ID: 100464747009
Provider Gender: Male
License Number: 20A23095
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC
Hours: M-TU 8:30AM-5PM
TH-F 8:30AM-5PM

FQHC

VCC DURIAN,
Provider ID: PG0083886012
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: WC
Hours: M-TU 8:30AM-5PM
TH-F 8:30AM-5PM

FQHC

VCC DURIAN,
Provider ID: PG0083886012
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: WC
Hours: M-TU 8:30AM-5PM
TH-F 8:30AM-5PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,
Provider ID: PG0085050005
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000

C. Red de proveedores de atención primaria

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

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,
Provider ID: PG0085050005
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: WC
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

AMBO, STANLEY
License Type: MD
Provider ID: 100055119006
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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

PEDIATRICS

HARTFORD, NICOLE
License Type: DO
Provider ID: 100289749026
Provider Gender: Female
License Number: 20A14390
NPI: 1346530466
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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: WC

PEDIATRICS

HARTFORD, NICOLE
License Type: DO
Provider ID: 100289749026
Provider Gender: Female
License Number: 20A14390
NPI: 1346530466
Provider English Spoken: Y
Cultural Competency: N

Board Certified: 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: WC

PEDIATRICS

KRAK, MICHAEL
License Type: MD
Provider ID: 100024953007
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: 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: P, EB, IB, E, R, T
Hours: M-F 8:30AM-6PM SA 9AM-1PM

PEDIATRICS

LINARES, YENDI
License Type: MD
Provider ID: 100333682016
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: 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
Hours: SU 10AM-2PM M-F 8AM-5PM

PEDIATRICS

LUSCHWITZ, BRIAN
License Type: MD
Provider ID: 100014503006
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: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

C. Red de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

LUSCHWITZ, BRIAN
License Type: MD
Provider ID: 100014503006
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: 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: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

NAUDIN, VERONICA
License Type: MD
Provider ID: 100087547009
Provider Gender: Female
NPI: 1093755878
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

NISHIKAWA, MOENA
License Type: MD
Provider ID: 100440638003
Provider Gender: Female
NPI: 1407434533
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Board Certified: 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
Hours: M-F 8AM-5PM

PEDIATRICS

PERTL, URSULA
License Type: MD

C. Red de proveedores de atención primaria

Provider ID: 100072222023
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: 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
Hours: SU 10AM-2PM
M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974022
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

RONAN, KEVIN

License Type: MD
Provider ID: 100207974022
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: 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: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

DOULA

AMARKARIAN, ARIEL

Provider ID: 100467919001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1891581070
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

ARJONA, STEPHANIE

Provider ID: 100459037001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1215625116
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
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

BROUHARD, MARIE

Provider ID: 100465013001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1801685565
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

BURTON, JALISA

Provider ID: 100472669001
Board Certified: No
DIVINE BIRTHING SERVICES LLC
Phone: (661) 234-7623
After Hours Phone: (661) 234-7623
Provider Gender: Female
NPI: 1366156507
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.divinebirthingservices.org

DOULA

CARAWAY, ARLENE

Provider ID: 100447487001
Board Certified: 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) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL):

N

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

Website: www.forthevillage .org

DOULA

CARR, ANGEL

Provider ID: 100451246001

Board Certified: No

HAPPY BABY JOURNEY

Phone: (626) 628-0205

After Hours Phone: (626) 628-0205

Provider Gender: Female

NPI: 1417652686

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-W 6PM-9AM TH-F 9AM-6PM SA 9AM-6PM

Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

CARTER, LEXXUS

Provider ID: 100408916002

Board Certified: 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

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

Website: www.forthevillage .org

DOULA

CENTENO QUIEL, JULISSA

Provider ID: 100449689001

Board Certified: No

FOR THE VILLAGE INC

Phone: (619) 657-3384

After Hours Phone: (619) 657-3384

Provider Gender: Female

NPI: 1871327684

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

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

Website: www.forthevillage .org

DOULA

COOK, ROSALINE

Provider ID: 100458242002

Board Certified: No

HAPPY BABY JOURNEY

Phone: (626) 628-0205

After Hours Phone: (626) 628-0205

Provider Gender: Female

NPI: 1104522945

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-W 6PM-9AM TH-F 9AM-6PM SA 9AM-6PM

Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

COOK, ROSALINE

Provider ID: 100458242001

Board Certified: No

FOR THE VILLAGE INC

Phone: (619) 657-3384

After Hours Phone: (619) 657-3384

Provider Gender: Female

NPI: 1104522945

Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.forthevillage.org

DOULA

CORLEY MILNER, JANTENEE
Provider ID: 100449708001
Board Certified: 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
Hours: M-W 5PM-9AM
TH-F 9AM-5PM
Website: www.forthevillage.org

DOULA

CRAWFORD, THELMA
Provider ID: 100458714001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1669271516
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

DIVINE BIRTHING SERVICES LLC,
Provider ID: PG0138970001
Phone: (661) 234-7623
After Hours Phone: (661) 234-7623
NPI: 1740087535
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.divinebirthingservices.org

DOULA

ERAZO, LIGIA
Provider ID: 100465861001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1891582417
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

FOR THE VILLAGE INC,
Provider ID: PG0121078002
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
Hours: M-F 9AM-5PM
Website: www.forthevillage.org

D. Red de proveedores médicos especialistas

DOULA

GOUGH, ELIZABETH

Provider ID: 100451243001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1316792344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

GRANT, PERRIETTE

Provider ID: 100449741001
Board Certified: 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
Hours: M-W 5PM-9AM
TH-F 9AM-5PM
Website: www.forthevillage.org

DOULA

GROSS, RENEE

Provider ID: 100450165002
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1629757927
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

HAMBERRY, CLARISSA

Provider ID: 100459363001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1528899671
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

HAMPTON, DESTINY

Provider ID: 100459324001
Board Certified: No
FOR THE VILLAGE INC
Phone: (619) 657-3384
After Hours Phone: (619) 657-3384
Provider Gender: Female
NPI: 1164231593
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.forthevillage

.org

DOULA

HAPPY BABY JOURNEY,
Provider ID: PG0135454001
Phone: (626) 628-0205
Fax: (626) 243-2628
After Hours Phone: (626) 628-0205
NPI: 1992532329
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

KNOX, LATANIA
Provider ID: 100446236001
Board Certified: 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
Hours: M-W 5PM-9AM
TH-F 9AM-5PM
Website: www.forthevillage.org

DOULA

MANINI, RAQUEL
Provider ID: 100458792001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1437959855
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

MATTSON, LACI
Provider ID: 100459050001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1295546208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

MERCADO FORSECK, ALEJANDRA
Provider ID: 100449707001
Board Certified: 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
Hours: M-W 5PM-9AM

TH-F 9AM-5PM
Website: www.forthevillage .org

DOULA

OMAE, ILANA
Provider ID: 100449706001
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 5PM-9AM TH-F 9AM-5PM
Website: www.forthevillage .org

DOULA

PERRY, YVETTE
Provider ID: 100472646001
Board Certified: No
DIVINE BIRTHING SERVICES LLC
Phone: (661) 234-7623
After Hours Phone: (661) 234-7623
Provider Gender: Female
NPI: 1932819745
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.divinebirthingservices.org

DOULA

PETROVSKY, AUTUMN
Provider ID: 100459049001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1518789114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM TH-F 9AM-6PM SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

RAMIREZ, LINDA
Provider ID: 100461243001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1689376956
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM TH-F 9AM-6PM SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

RANGEL, HANNELORE
Provider ID: 100474362001
Board Certified: No
FOR THE VILLAGE INC
Phone: (619) 657-3384
After Hours Phone: (619) 657-3384
Provider Gender: Female
NPI: 1922713320
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Website: www.forthevillage .org

DOULA

SANDOVAL, KATE

Provider ID: 100459025001

Board Certified: No

HAPPY BABY JOURNEY

Phone: (626) 628-0205

After Hours Phone: (626) 628-0205

Provider Gender: Female

NPI: 1730996174

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM

Website: WWW.HAPPYBAB YJOURNEY.COM

DOULA

STEPHENS, ABBY

Provider ID: 100467942001

Board Certified: No

HAPPY BABY JOURNEY

Phone: (626) 628-0205

After Hours Phone: (626) 628-0205

Provider Gender: Female

NPI: 1821890252

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM

Website: WWW.HAPPYBAB YJOURNEY.COM

DOULA

STORMS, JADE

Provider ID: 100451253001

Board Certified: No

HAPPY BABY JOURNEY

Phone: (626) 628-0205

After Hours Phone: (626) 628-0205

Provider Gender: Female

NPI: 1992532386

Provider English Spoken: Y

Provider Language(s) Spoken: Mandarin, Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM

Website: WWW.HAPPYBAB YJOURNEY.COM

DOULA

THOMPSON, ELLA

Provider ID: 100459059001

Board Certified: No

HAPPY BABY JOURNEY

Phone: (626) 628-0205

After Hours Phone: (626) 628-0205

Provider Gender: Female

NPI: 1598573974

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-W 6PM-9AM
TH-F 9AM-6PM
SA 9AM-6PM

Website: WWW.HAPPYBAB YJOURNEY.COM

DOULA

VALMARROSA, GILDA

Provider ID: 100474393001

Board Certified: No

FOR THE VILLAGE INC

Phone: (619) 657-3384

After Hours Phone: (619) 657-3384

Provider Gender: Female

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1336953892
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.forthevillage.org

DOULA

VALSAINT, JOSIANE
Provider ID: 100458790001
Board Certified: No
FOR THE VILLAGE INC
Phone: (619) 657-3384
After Hours Phone: (619) 657-3384
Provider Gender: Female
NPI: 1306531249
Provider English Spoken: Y
Provider Language(s) Spoken: French, Haitian Creole
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: www.forthevillage.org

DOULA

VARGAS, BRIANDA
Provider ID: 100449694001
Board Certified: 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
Hours: M-W 5PM-9AM TH-F 9AM-5PM
Website: www.forthevillage.org

DOULA

VONGFAK, HAMMINA
Provider ID: 100467972001
Board Certified: No
HAPPY BABY JOURNEY
Phone: (626) 628-0205
After Hours Phone: (626) 628-0205
Provider Gender: Female
NPI: 1508671827
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-W 6PM-9AM TH-F 9AM-6PM SA 9AM-6PM
Website: WWW.HAPPYBABYJOURNEY.COM

DOULA

WASHINGTON, KRYSTAL
Provider ID: 100449724001
Board Certified: 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
Hours: M-W 5PM-9AM TH-F 9AM-5PM
Website: www.forthevillage.org

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS
Provider ID: 100334990009
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS
Provider ID: 100334990009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA
Provider ID: 100353912006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP23004
NPI: 1760765333
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: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA
Provider ID: 100353912006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP23004
NPI: 1760765333
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: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

g

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 100333696006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

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

Website: www.mtnhealth.org

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 100333696006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

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

Website: www.mtnhealth.org

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 100369959004

Board Certified: 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

License Number: DC28335

NPI: 1619040292

Provider English Spoken: Y

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.mtnhealth.org

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 100369959004

Board Certified: 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

License Number: DC28335

NPI: 1619040292

Provider English Spoken: Y

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

CHIROPRACTOR

KELCHNER, MATTHEW
Provider ID: 100065809020
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.mtnhealth.org

CHIROPRACTOR

KELCHNER, MATTHEW
Provider ID: 100065809020
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.mtnhealth.org

CHIROPRACTOR

PHILLIPS, KATHERINE
Provider ID: 100417828004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BLESSING, JOSHUA
Provider ID: 100380360007
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
Fax: (619) 445-3958
After Hours Phone: (619) 445-1188
Provider Gender: Male
NPI: 1225566714
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

Hours: M-F 8AM-4:30PM
Website: N/A

FAMILY PRACTICE

CALVERT, ROBERT
Provider ID: 100464172005
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
Fax: (619) 659-3141
After Hours Phone: (619) 445-1188
Provider Gender: Male
NPI: 1922458298
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
Website: N/A

INTERNAL MEDICINE

GRANADA, STEVE
Provider ID: 100440768006
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
Fax: (619) 445-3958
After Hours Phone: (619) 445-1188
Provider Gender: Male
NPI: 1235290826
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Website: N/A

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093050
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Provider Gender: Female
NPI: 1669825667
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
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
Provider ID: 100334679005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
Provider ID: 100334679005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

PHYSICIANS ASSISTANT

SHARPE, NORMA
Provider ID: 100091046014
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.mtnhealth.org

PSYCHOLOGIST

TORRES, RANDALL
Provider ID: 100422402004
Board Certified: 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: WC
Website: N/A
IPA: IHP of Southern Cal-PHP

BRAWLEY

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN
Provider ID: 100256000014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CAMPO

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL
Provider ID: 100178060024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP20849
NPI: 1487889846
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: P, EB, IB, E, WC, ME
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL
Provider ID: 100178060024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP20849
NPI: 1487889846
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: P, EB, IB, E, WC, ME
Website: www.syhealth.org

FAMILY PRACTICE

BAUM, PETER
Provider ID: 100333446016
Board Certified: 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
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

BLESSING, JOSHUA
Provider ID: 100380360008
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN

D. Red de proveedores médicos especialistas

36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Provider Gender: Male
NPI: 1225566714
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
Website: N/A

FAMILY PRACTICE

CALVERT, ROBERT
Provider ID: 100464172006
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
Fax: (619) 659-3141
After Hours Phone: (619) 445-1188
Provider Gender: Male
NPI: 1922458298
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
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROGERS, MATTHEW
Provider ID: 100367119007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

GRANADA, STEVE
Provider ID: 100440768007
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
Fax: (619) 478-1031
After Hours Phone: (619) 445-1188
Provider Gender: Male
NPI: 1235290826
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Website: N/A

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093051
Board Certified: No
SOUTHERN INDIAN HEALTH COUNCIL - PHP ADMIN
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Provider Gender: Female
NPI: 1669825667
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
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

SHARPE, NORMA
Provider ID: 100091046021
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Website: www.syhealth.org

PHYSICIANS ASSISTANT

SHARPE, NORMA
Provider ID: 100091046021
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Website: www.syhealth.org

CARLSBAD

AUDIOLOGIST

ARHART, KESLEY
Provider ID: 100449940019
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1750041687
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

EARLES, LYDIA
Provider ID: 100440915012
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1528897899
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

SERENO, EMILY
Provider ID: 100430569014
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1023789591
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

RICE, ELIZABETH
Provider ID: 100419296009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

DERMATOLOGY

ZUBAIR, RAHEEL
Provider ID: 100417959013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

FAMILY PRACTICE

CHAVEZ SANTOS, MARIA
Provider ID: 100433794003
Board Certified: 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
Hours: M-F 8AM-8PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

D. Red de proveedores médicos especialistas

GALLAGHER, JEFFERY
Provider ID: 100434665012
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1457926370
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

DROKER, BRIAN
Provider ID: 100419701016
Board Certified: 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
Hours: M 8AM-5PM
W 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

HAMILTON, ROSS
Provider ID: 100435395022
Board Certified: 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
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

OTOLARYNGOLOGY

DONALDSON, CHADWICK
Provider ID: 100329438031
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICAL MEDICINE / REHABILITATION

BO, CHRISTOPHER
Provider ID: 100445300012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN
Provider ID: 100355340003
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

INOCELDA, ANDREW
Provider ID: 100103696009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

WILAND, WINONA
Provider ID: 100401498002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER
Provider ID: 100020627010
Board Certified: 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: WC
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 NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 100333991004
Board Certified: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942469663
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, HOAG HOSPITAL IRVINE, 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD
Provider ID: 100002342076
Board Certified: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1215176839
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
Provider ID: 100405559016
Board Certified: 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, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN
Provider ID: 100332790004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CHULA VISTA

ALLERGY IMMUNOLOGY

REDDY, SUMANA
Provider ID: 100133573041
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: C52581
NPI: 1053300251
Provider English Spoken: Y
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

ALLERGY IMMUNOLOGY

REDDY, SUMANA
Provider ID: 100133573041
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: C52581
NPI: 1053300251

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 100347956027
Board Certified: 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
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: 100347956031
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

AUDIOLOGIST

ARHART, KESLEY
Provider ID: 100449940020
Board Certified: 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: Female
NPI: 1750041687
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

EARLES, LYDIA
Provider ID: 100440915017
Board Certified: No

COMMUNITY CARE IPA LLC
577 3RD AVE
CHULA VISTA, CA 91910
Phone: (858) 909-0770
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1528897899
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

SERENO, EMILY
Provider ID: 100430569018
Board Certified: No
COMMUNITY CARE IPA LLC
577 3RD AVE
CHULA VISTA, CA 91910
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1023789591
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED ACUPUNCTURIST

LAM, KHANH
Provider ID: 100081201014
Board Certified: No
IHP OF SOUTHERN CAL-PHP
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1649594979
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH
Provider ID: 100286429008
Board Certified: 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: P, EB, IB, E, T
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 100358973008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500

Provider Gender: Female
License Number: NP95009933
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 100358973008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: NP95009933
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

ARMSTON, LINDSEY
Provider ID: 100382080006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BIMSTEIN, JAIME
Provider ID: 100457622005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915
Phone: (619) 482-1700
After Hours Phone: (619) 482-1700
Provider Gender: Male
NPI: 1730430844
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

CARRION-GELABERT, ANA
Provider ID: 100214966011
Board Certified: 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
Hours: M-F 8AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 100390636018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 369-4880
After Hours Phone: (619) 425-3840
Provider Gender: Female
NPI: 1528632742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, IB, E, R, T, WC, ME
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: 100336607005
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 100324677018
Board Certified: 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

Hours: M-F 8:30AM-5:30PM SA 8:30AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 100324677013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 100324677013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

KEUM, SARAH
Provider ID: 100444706003
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY
Provider ID: 100334265005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY
Provider ID: 100334265005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
Provider ID: 100341660003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
Provider ID: 100341660003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: RN371480

NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
Provider ID: 100341660003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
Provider ID: 100341660003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 100367518001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 100367518001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

SAUNDERS, DENISE
Provider ID: 100366839003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

SAUNDERS, DENISE
Provider ID: 100366839003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

TRESSLAR, PERI
Provider ID: 100444546003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500

D. Red de proveedores médicos especialistas

Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
- *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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8AM-5PM*
- *Website: www.fhcsd.org*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*

Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
- *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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8AM-5PM*
- *Website: www.fhcsd.org*

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
Provider ID: 100335310002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*

Provider Gender: Female
License Number: NM792
NPI: 1174553259
- *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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8AM-5PM*
- *Website: www.fhcsd.org*

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
Provider ID: 100335310002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*

Provider Gender: Female
License Number: NM792
NPI: 1174553259
- *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: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-F 8AM-5PM*
- *Website: www.fhcsd.org*

CHIROPRACTOR

ABDULRAHIM, AHMED
Provider ID: 100369959007
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
Provider English Spoken: Y
Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

ABDULRAHIM, AHMED
Provider ID: 100369959007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
Provider English Spoken: Y
Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

HASHEM, SHIVA
Provider ID: 100367707002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: DC26269
NPI: 1952950776
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

HASHEM, SHIVA
Provider ID: 100367707002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: DC26269
NPI: 1952950776
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

KAZEM, HARON

D. Red de proveedores médicos especialistas

Provider ID: 100258931002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC33295
NPI: 1306221262
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CHIROPRACTOR

KAZEM, HARON
Provider ID: 100258931002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC33295
NPI: 1306221262
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CHIROPRACTOR

PLANTE, CHARLES
Provider ID: 100171626002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC31963
NPI: 1760464960
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CHIROPRACTOR

PLANTE, CHARLES
Provider ID: 100171626002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC31963
NPI: 1760464960
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CHIROPRACTOR

REYNOSO, ALFONSO
Provider ID: 100334125002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE

CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC20760
NPI: 1285921627
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

CHIROPRACTOR

REYNOSO, ALFONSO
Provider ID: 100334125002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC20760
NPI: 1285921627
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 100420058016
Board Certified: 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
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

REALYVASQUEZ, JOHN
Provider ID: 100463697019
Board Certified: 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: 1700464237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN JOAQUIN GENERAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
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: 100349664009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

ENDOCRINOLOGY METABOLISM DIABETES

CARRILLO, MARITZA
Provider ID: 100349664009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
Provider ID: 100354616009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
Provider ID: 100354616009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

D. Red de proveedores médicos especialistas

MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

FAMILY PRACTICE

BECERRA, MAURA
Provider ID: 100443851006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

GARCIA, KARLA
Provider ID: 100269760007
Board Certified: 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: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T
Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SPAK, DARYL
Provider ID: 100438914004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

CHAVEZ, LUIS
Provider ID: 100442545008
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

WIENER, GREGORY
Provider ID: 100006354021
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100006354014
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100112511030
Board Certified: No
COMMUNITY CARE IPA LLC
310 3RD AVE STE C11

CHULA VISTA, CA 91910
Phone: (619) 426-0841
Fax: (619) 426-9197
After Hours Phone: (619) 426-0841
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

GALLAGHER, JEFFERY
Provider ID: 100434665007
Board Certified: 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: 1457926370
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA
Provider ID: 100375236009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA
Provider ID: 100375236009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

D. Red de proveedores médicos especialistas

INFECTIOUS DISEASE

POLESKY, ANDREA
Provider ID: 100084365004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: G81333
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: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM
Website: www.syhealth.org

INFECTIOUS DISEASE

POLESKY, ANDREA
Provider ID: 100084365004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: G81333
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: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM
Website: www.syhealth.org

INTERNAL MEDICINE

CHEN, TSUH-YIN
Provider ID: 100187934015
Board Certified: 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: 1093803520
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T
Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8:30AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

HONASOGE, AKILESH
Provider ID: 100471192010
Board Certified: No
IHP OF SOUTHERN CAL-PHP
865 3RD AVE STE 133
CHULA VISTA, CA 91911
Phone: (619) 916-2100
After Hours Phone: (619) 916-2100
Provider Gender: Male
NPI: 1497118020
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 100344561007
Board Certified: 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, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 100344561049
Board Certified: No
COMMUNITY CARE IPA LLC
865 3RD AVE STE 133
CHULA VISTA, CA 91911
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1831393289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

NAGHI, JESSE
Provider ID: 100292647007
Board Certified: 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
Hours: M-F 8AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI
Provider ID: 100109936025
Board Certified: 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: WC
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH
Provider ID: 100278405006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 100403129011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA
Provider ID: 100198334015
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 100413994017
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK
Provider ID: 100019303014
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
435 H ST
CHULA VISTA, CA 91910
Phone: (619) 691-7000
Fax: (619) 260-7055
After Hours Phone: (619) 691-7000
Provider Gender: Male
NPI: 1801978143
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GUPTA, MONIKA
Provider ID: 100195257044
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS
Provider ID: 100196834020
Board Certified: 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, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, MAYERS MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM
Provider ID: 100391342014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE
Provider ID: 100330735043
Board Certified: 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: 1225474034
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
Provider ID: 100075572014
Board Certified: 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: P, EB, IB, E, WC
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: 100075572012
Board Certified: 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: P, EB, IB, E, WC
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: 100273510011
Board Certified: 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
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 7AM-6PM SA 7AM-2PM
Website: N/A
IPA: Community Care IPA LLC

OPHTHALMOLOGY

GOLDMAN, DAVID
Provider ID: 100434925004
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

GOLDMAN, DAVID
Provider ID: 100434925002
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

MUNDAE, RUSDEEP
Provider ID: 100444986015
Board Certified: 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: Male
NPI: 1811488687
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

D. Red de proveedores médicos especialistas

PAPASTERGIOU, GEORGIOS
Provider ID: 100202503018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: 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: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
Provider ID: 100202503018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: 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: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

SHAH, SONA
Provider ID: 100411309006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
311 DEL MAR AVE
CHULA VISTA, CA 91910
Phone: (619) 472-3355
Fax: (619) 427-0955
After Hours Phone: (619) 472-3355
Provider Gender: Female
NPI: 1750943403
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
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s)

Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093014
Board Certified: 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: 1669825667
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: WC
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093009
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093018
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

SCOVILL, ALEXANDRA
Provider ID: 100357233004
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA
Provider ID: 100419888011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1851927883
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
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: 100435004013
Board Certified: 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
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
Provider ID: 100057498007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 100365371012
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1316162324
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
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: 100397382008
Board Certified: 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
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PERTL, URSULA
Provider ID: 100072222030
Board Certified: 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: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
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: 100376522015
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 100198556020
Board Certified: 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
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

ROWHANI, NAGHMEH
Provider ID: 100139347008
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
Provider ID: 100406371002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
Provider ID: 100406371001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
Provider ID: 100406371002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
Provider ID: 100406371001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Provider Gender: Female
License Number: PA61683
NPI: 1215477765
- *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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Chinese, French, Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Chinese, French, Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616013
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100

After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616013
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

GUTH, CARA
Provider ID: 100373828007
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 100334762019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 100334762019
Board Certified: No
IHP OF SOUTHERN CAL-PHP

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

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 100334762025
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 100334762008
Board Certified: 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: WC
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

KAMOTO, LYNN
Provider ID: 100197328011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1392 E PALOMAR ST STE 501
CHULA VISTA, CA 91913
Phone: (619) 662-4100
Fax: (619) 271-7451
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1447326459
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
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MARISCAL, MIGUEL
Provider ID: 100430727002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MENDEZ, JESUS
Provider ID: 100354539004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

MENDEZ, JESUS
Provider ID: 100354539004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

QUICK, ELISABETH
Provider ID: 100235071009
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

D. Red de proveedores médicos especialistas

QUICK, ELISABETH
Provider ID: 100235071009
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

REVELES, DIANA
Provider ID: 100333299004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

REVELES, DIANA
Provider ID: 100333299004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
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: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

SPERRY, TASHIA
Provider ID: 100442639014
Board Certified: 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: 1619304128
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

THOMAS, KIMBERLY
Provider ID: 100434772006
Board Certified: No
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
Provider Gender: Female
License Number: PA16768
NPI: 1396052007
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

THOMAS, KIMBERLY
Provider ID: 100434772006
Board Certified: No
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
Provider Gender: Female
License Number: PA16768
NPI: 1396052007
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-5PM SA 8AM-4PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL
Provider ID: 100341601006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
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: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL
Provider ID: 100341601006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1637 3RD AVE STE H
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
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: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

D. Red de proveedores médicos especialistas

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 100341601006

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

1637 3RD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

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

Website: www.syhealth.org

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 100341601006

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

1637 3RD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

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

Website: www.syhealth.org

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 100347059011

Board Certified: No

IHP OF SOUTHERN CAL-PHP

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619) 600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 100347059008

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER
Provider ID: 100347059004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

BRAZIER, SETH
Provider ID: 100298667015
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PODIATRIST

DAVIDSON III, JOHN
Provider ID: 100330956005
Board Certified: 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: WC
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

D. Red de proveedores médicos especialistas

DAVIDSON III, JOHN
Provider ID: 100330956038
Board Certified: 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: 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: WC
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431014
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431014
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Website: www.syhealth.org

PODIATRIST

READ, TRENTON
Provider ID: 100400838007
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PODIATRIST

SCHNEIDER, SARAH
Provider ID: 100059607007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PODIATRIST

SCHNEIDER, SARAH
Provider ID: 100059607007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PSYCHOLOGIST

BAYLON, ALDO
Provider ID: 100357646006
Board Certified: 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: P, EB, IB, E, T
Hours: M-F 8AM-8PM
SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

CELAYA, PATRICIA
Provider ID: 100390713004
Board Certified: 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: P, EB, IB, E, T
Hours: M-F 8AM-8PM
SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GOULD, HILARY
Provider ID: 100363698006
Board Certified: 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: P, EB, IB, E, T
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: 100351889006
Board Certified: 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: P, EB, IB, E, T
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 100388410017
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 100009016015
Board Certified: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851

Provider Gender: Female
NPI: 1053348920
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO
Provider ID: 100283680013
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Male
License Number: PT37189
NPI: 1437445566
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO
Provider ID: 100283680013
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Male
License Number: PT37189
NPI: 1437445566
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

AVILES, LEAH
Provider ID: 100439565001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PT298792
NPI: 1548867419
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

AVILES, LEAH
Provider ID: 100439565001

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PT298792
NPI: 1548867419
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 100423333013
Board Certified: 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
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: 100423333017
Board Certified: 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
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: 100423333004
Board Certified: 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
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

D. Red de proveedores médicos especialistas

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 100423333016

Board Certified: 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

Min/Max Age: 0\None

American Sign Language (ASL): N

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: 100451454010

Board Certified: 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

Hours: M-TH 7AM-7PM
F 7AM-12PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

CHUNG, PETER

Provider ID: 100451454008

Board Certified: 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: 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

Hours: M-TH 7AM-7PM
F 7AM-12PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 100378318002

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 100378318002

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

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: P, EB, IB, E, R, T, WC, ME

Hours: M-F 8AM-5PM

Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA

Provider ID: 100381685007

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 100378155009

Board Certified: 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

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: 100378155014

Board Certified: 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: 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
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: 100378155013
Board Certified: 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
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: 100381855019
Board Certified: 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
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: 100381855021
Board Certified: 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
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: 100381855013
Board Certified: No
IHP OF SOUTHERN CAL-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
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: 100381855004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

MAALOUF, LAUREN
Provider ID: 100447110006
Board Certified: 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: 1881420206
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
Provider ID: 100341263004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 100341263004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 100418736012
Board Certified: 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
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: 100418736011
Board Certified: 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
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: 100440932007
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

D. Red de proveedores médicos especialistas

Provider ID: 100418736018
Board Certified: 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
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: 100418736017
Board Certified: 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
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: 100356824019
Board Certified: 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
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: 100356824020
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

THERAPIST

NOVENCIDO, ANDREW
Provider ID: 100356824014
Board Certified: 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
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: 100356824008
Board Certified: 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
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: 100361481011
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
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: 100361481008
Board Certified: 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: 1093328064
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA
Provider ID: 100378205001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA
Provider ID: 100378205001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 100008189022
Board Certified: 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
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: 100008189016
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
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: 100008189028
Board Certified: 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
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: 100008189027
Board Certified: 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
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: 100403938011
Board Certified: 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
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: 100403938006

Board Certified: 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
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: 100403938007
Board Certified: 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
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: 100403938010
Board Certified: 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
Hours: M 8AM-5PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VAISMAN, SAMANTHA
Provider ID: 100380415017
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VERISSIMO, TAYLOR
Provider ID: 100439741006
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VERISSIMO, TAYLOR
Provider ID: 100439741007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 100357282010
Board Certified: 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
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 100357282015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
386 E H ST STE 203
CHULA VISTA, CA 91910
Phone: (619) 482-3000
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
Website: N/A
IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

CHWA, JEFFREY
Provider ID: 100336270022
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 100401867014
Board Certified: 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
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 100416078009
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CORONADO

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
230 PROSPECT PL STE 210
CORONADO, CA 92118
Phone: (619) 299-0670
Fax: (858) 429-7929
After Hours Phone: (619) 299-0670
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

D. Red de proveedores médicos especialistas

SURGERY GENERAL

BORTZ, PASCAL

Provider ID: 100363724014

Board Certified: No

IHP OF SOUTHERN CAL-PHP

230 PROSPECT PL STE 340
CORONADO, CA 92118

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

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

EL CAJON

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 100133573042

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Website: www.syhealth.org

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 100133573042

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

ALVA, WENDY

Provider ID: 100320066006

Board Certified: 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

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

ARMSTON, LINDSEY
Provider ID: 100382080019
Board Certified: 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 VISTA, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
Provider ID: 100344817002
Board Certified: 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
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
Provider ID: 100344817002
Board Certified: 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
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

CARRION-GELABERT, ANA
Provider ID: 100214966025
Board Certified: 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
Hours: M-F 8AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 100390636029
Board Certified: 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
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: 100336607020
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DOWNEY, NANCY
Provider ID: 100443717003
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
Provider ID: 100360073004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female

D. Red de proveedores médicos especialistas

License Number: NP95012943
NPI: 1477755684
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: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
Provider ID: 100360073004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
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: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

GARCIA, CATALINA
Provider ID: 100442656003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
Provider ID: 100364051002
Board Certified: 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
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
Provider ID: 100364051002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 100334972005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95001707
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: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 100334972004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 100334972005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95001707
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: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL
Provider ID: 100330403002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL
Provider ID: 100330403002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412035
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619) 270-3600
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412033
Board Certified: No
IHP OF SOUTHERN CAL-PHP
470 N MOLLISON AVE
EL CAJON, CA 92021
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619) 270-3600
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN
Provider ID: 100378264001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Provider Gender: Female
License Number: NP95009180
NPI: 1649757741
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN
Provider ID: 100378264001
Board Certified: 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
Provider Gender: Female
License Number: NP95009180
NPI: 1649757741
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY
Provider ID: 100334265001
Board Certified: 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
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
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: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY
Provider ID: 100334265001
Board Certified: 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
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
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

D. Red de proveedores médicos especialistas

Accessibility: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

NGUYEN, VANESSA
Provider ID: 100418792015
Board Certified: 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
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
Provider ID: 100246128004
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
Provider ID: 100246128005
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
Provider ID: 100246128004
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
Provider ID: 100246128005
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

PIRTLE, KEYSHONE
Provider ID: 100376692003
Board Certified: No
COMMUNITY CARE IPA LLC
5442 SYCUAN RD
EL CAJON, CA 92019
Phone: (619) 445-0707
Fax: (619) 445-9764
After Hours Phone: (619) 445-0707
Provider Gender: Male
NPI: 1417567827
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T, WC
Hours: M-F 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

REAL, MARIA
Provider ID: 100333899004
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PRACTITIONER

REAL, MARIA

Provider ID: 100333899004

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REGEV, SHANEE

Provider ID: 100404061013

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

REGEV, SHANEE

Provider ID: 100404061013

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 100334050005

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REID, EMILY
Provider ID: 100334050005
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA
Provider ID: 100246149004
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA
Provider ID: 100246149004
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
Provider ID: 100334655001
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347

D. Red de proveedores médicos especialistas

Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
Provider ID: 100334655001
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
Provider ID: 100334173001
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
Provider ID: 100334173001
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830008

Board Certified: 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
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830008
Board Certified: 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
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335010
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619) 795-5983
Provider Gender: Male
License Number: DC29314
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.lamaestra.org

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335010
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619) 795-5983
Provider Gender: Male
License Number: DC29314
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.lamaestra.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733006
Board Certified: 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
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733006
Board Certified: 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
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733004
Board Certified: 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
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, WC, ME
Website: www.fhcsd.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733004
Board Certified: 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
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N

Accessibility: EB, IB, E, R, WC, ME

Website: www.fhcsd.org

CHIROPRACTOR

UY, ASHLEY

Provider ID: 100334589005

Board Certified: 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

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

CHIROPRACTOR

UY, ASHLEY

Provider ID: 100334589005

Board Certified: 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

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 100333866004

Board Certified: 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

Provider Gender: Female

License Number: A149552

NPI: 1750780516

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 100333866004

Board Certified: 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

Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM
Website: www.fhcsd.org

GASTROENTEROLOGY

CHAVEZ, LUIS
Provider ID: 100442545007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 100112511034
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208026
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM
Website: www.lamaestra.org

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208026

Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

INTERNAL MEDICINE

MAY, LOUIS
Provider ID: 100325305010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

MICHAEL, RAMI
Provider ID: 100341876013
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN
Provider ID: 100033535073
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN
Provider ID: 100033535073
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 100344561047
Board Certified: 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, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
Provider ID: 100009399069
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM
Website: www.fhcsd.org

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
Provider ID: 100009399069
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM
Website: www.fhcsd.org

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI
Provider ID: 100109936058
Board Certified: 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
Website: N/A
IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

NEUROLOGY

GUPTA, MONIKA
Provider ID: 100195257055
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS
Provider ID: 100196834029
Board Certified: 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, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, MAYERS MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM
Provider ID: 100391342026
Board Certified: 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
Hours: M-F 8AM-6PM SA 9AM-12:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE
Provider ID: 100330735062
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

JARDON, JAVIER
Provider ID: 100218078054
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

OPHTHALMOLOGY

JARDON, JAVIER
Provider ID: 100218078054
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

OPHTHALMOLOGY

MANI, NASRIN
Provider ID: 100050824053
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

MANI, NASRIN
Provider ID: 100050824053
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

MUNDAE, RUSDEEP
Provider ID: 100444986020
Board Certified: No
IHP OF SOUTHERN CAL-PHP
231 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 427-7755
Fax: (619) 425-2138
After Hours Phone: (619) 427-7755
Provider Gender: Male
NPI: 1811488687
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
Provider ID: 100202503044
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
Provider ID: 100202503044
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
- *Hours: M-F 8AM-5PM*
- *Website: www.syhealth.org*

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160047
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 875 EL CAJON BLVD
  EL CAJON, CA 92020
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*

Provider Gender: Male
License Number: A120584
NPI: 1285888628
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
- *Website: www.syhealth.org*

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160047
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 875 EL CAJON BLVD
  EL CAJON, CA 92020
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*

Provider Gender: Male
License Number: A120584
NPI: 1285888628
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
- *Website: www.syhealth.org*

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093020
Board Certified: 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*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PEDIATRICS

MURADIAN-MOORE, SARAH
Provider ID: 100443736003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 855 E MADISON AVE
  EL CAJON, CA 92020

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ACOSTA, ANGELICA
Provider ID: 100109185012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ALYAS, ALISIA
Provider ID: 100369842014
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ALYAS, ALISIA
Provider ID: 100369842013
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ALYAS, ALISIA
Provider ID: 100369842014
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ALYAS, ALISIA
Provider ID: 100369842013
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ARMENTA, JORGE
Provider ID: 100246129004
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ARMENTA, JORGE
Provider ID: 100246129004
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 100334762009
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

LE, TAYLOR
Provider ID: 100423383002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536012
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536012
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536032
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991

Provider Gender: Female
License Number: PA21625
NPI: 1154609790
- *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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8:30AM-5:30PM*
- *Website: www.lamaestra.org*

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536032
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 1032 BROADWAY
  EL CAJON, CA 92021
- *Phone: (619) 795-5991*
- *After Hours Phone: (619) 795-5991*

Provider Gender: Female
License Number: PA21625
NPI: 1154609790
- *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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8:30AM-5:30PM*
- *Website: www.lamaestra.org*

PHYSICIANS ASSISTANT

PATEL, SHREYA
Provider ID: 100334312001
Board Certified: 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*

Provider Gender: Female
License Number: PA18719
NPI: 1447468137
- *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: EB, IB, E, R, WC, ME*
- *Hours: M-F 8:30AM-5:30PM*
- *Website: www.fhcsd.org*

PHYSICIANS ASSISTANT

PATEL, SHREYA
Provider ID: 100334312001
Board Certified: 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*

Provider Gender: Female
License Number: PA18719
NPI: 1447468137
- *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: EB, IB, E, R, WC, ME*
- *Hours: M-F 8:30AM-5:30PM*
- *Website: www.fhcsd.org*

PHYSICIANS ASSISTANT

RAMOS, JACQUELYN
Provider ID: 100411761002

Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN
Provider ID: 100363699011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA22872
NPI: 1114041621
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: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN
Provider ID: 100363699011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA22872
NPI: 1114041621
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: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

TURNER, ERIC
Provider ID: 100334031001
Board Certified: 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
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, SHEREENA
Provider ID: 100084999008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

D. Red de proveedores médicos especialistas

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, SHEREENA
Provider ID: 100084999008
Board Certified: 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
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, ERIC
Provider ID: 100334031001
Board Certified: 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
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

JUAREZ, LETICIA
Provider ID: 100370317004
Board Certified: 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
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: www.fhcsd.org

PODIATRIST

JUAREZ, LETICIA

Provider ID: 100370317004
Board Certified: 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
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA

Provider ID: 100393939009
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA

Provider ID: 100393939009
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

PSYCHOLOGIST

ARAIZA, ERNESTINA

Provider ID: 100374363005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

WHEELER, KIM
Provider ID: 100412130003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CAMPA, PATRICIA
Provider ID: 100058412068
Board Certified: 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
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: 100058412070
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
Provider ID: 100378318004
Board Certified: 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
Provider Gender: Male

License Number: PT295173
NPI: 1497236384
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
Provider ID: 100378318004
Board Certified: 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
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
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: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

GONZALEZ, JUSTINE ARIEL
Provider ID: 100369685001
Board Certified: 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
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

GONZALEZ, JUSTINE ARIEL
Provider ID: 100369685001
Board Certified: 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
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
Website: www.fhcsd.org

REGISTERED PHYSICAL

D. Red de proveedores médicos especialistas

THERAPIST

KUIOKA, TROY

Provider ID: 100395854001

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Male

License Number: PT42665

NPI: 1912640053

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: www.syhealth.org

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY

Provider ID: 100395854001

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Male

License Number: PT42665

NPI: 1912640053

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: www.syhealth.org

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 100341263006

Board Certified: 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

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 100341263006

Board Certified: 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

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

REGISTERED PHYSICAL

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

THERAPIST

MORRIS, CHAD

Provider ID: 100033579016

Board Certified: 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

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: 100033579013

Board Certified: 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

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: 100178206030

Board Certified: 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

Hours: M-F 8AM-6PM

Website: N/A

IPA: Community Care IPA LLC

EL CENTRO

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 100348070019

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN
Provider ID: 100370717014
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MINOKADEH, ANUSHIRVAN
Provider ID: 100012813014
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
Provider ID: 100379614002
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TABAREZ, NORMA
Provider ID: 100362845003
Board Certified: 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: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 100340900009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HUTCHISON, HEIDI
Provider ID: 100362544003
Board Certified: 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: WC
Hours: SU 12AM-11:59PM M-F 8AM-5PM SA 12AM-11:59PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

RUDOLF, FRANCES
Provider ID: 100342793009
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (760) 339-7000
After Hours Phone: (760) 339-7000
Provider Gender: Female
NPI: 1821487430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 100346340003
Board Certified: 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: WC
Hours: SU 8AM-8PM
M-F 8AM-5PM
SA 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

AKRAMI, KEVAN
Provider ID: 100164246017
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

SWEENEY, DANIEL
Provider ID: 100136810013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AMANN, CHRISTOPHER
Provider ID: 100361003011
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1134326895
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL, PIH HEALTH GOOD SAMARITAN HOSPITAL, PIH HEALTH WHITTIER HOSPITAL, PIH HEALTH WHITTIER HOSPITAL, PIH Hospital - Downey
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 100113987027
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

GOWDA, ASHWIN
Provider ID: 100331143013
Board Certified: 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 RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PAGE, BRADY
Provider ID: 100433171006
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

RAMNATH, VENKTESH
Provider ID: 100007053025
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 100332067025
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

WARDI, GABRIEL
Provider ID: 100285449025
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (760) 339-7202

After Hours Phone: (760) 339-7202
Provider Gender: Male
NPI: 1720346083
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 100362595025
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ENCINITAS

CARDIOVASCULAR DISEASE

DURAN, EDWARD
Provider ID: 100419412024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS
Provider ID: 100440153004
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724066
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 100441975019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA
Provider ID: 100260819011
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1306978614
Provider English Spoken: Y
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

CERTIFIED NURSE PRACTITIONER

CHAMBERS, KATRINA
Provider ID: 100407061005
Board Certified: 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
Hours: M-F 8AM-5PM

Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN
Provider ID: 100283303017
Board Certified: 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
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: 100334276012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

IORIO, ALANNA
Provider ID: 100449961012
Board Certified: No
COMMUNITY CARE IPA LLC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Female
NPI: 1295556256
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA
Provider ID: 100021363014
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SAADA, HASSAN
Provider ID: 100443727007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE
Provider ID: 100005508012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WALKINS, BETHANY
Provider ID: 100457547015
Board Certified: 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: 1245545581
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA
Provider ID: 100405552016
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN
Provider ID: 100079514013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

ENDOCRINOLOGY METABOLISM DIABETES

HUPFELD, CHRISTOPHER
Provider ID: 100048282009
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 100
ENCINITAS, CA 92024
Phone: (858) 657-1636
Fax: (888) 539-8781
After Hours Phone: (858) 657-1636
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

SHAH, NIYATI
Provider ID: 100443786004
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

PATEL, JANKI
Provider ID: 100351876016
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 100001887049
Board Certified: 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, 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 100245868018
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 100
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 100245868030
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS
Provider ID: 100011710010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 100049168015
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 100444865020
Board Certified: 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
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS
Provider ID: 100061686010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 100374854007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 100413994015
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
354 SANTA FE DR

D. Red de proveedores médicos especialistas

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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 100143665018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

BUI, JONATHAN
Provider ID: 100104833044
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA

Provider ID: 100290462042

Board Certified: 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: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA

Provider ID: 100290462023

Board Certified: 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: 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: P, EB, IB, E, R, T, WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

Provider ID: 100441980017

Board Certified: 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: 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

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 100306202025

Board Certified: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544044
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544043
Board Certified: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Female
NPI: 1730507567
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 100334516007
Board Certified: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Phone: (858) 657-7200
After Hours Phone: (858) 657-7200

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 100333754006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 100042994026
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (760) 944-3927
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1871664631
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 100329999012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 100402237013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 100041362025
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946034
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
BLDG D
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 100007418030
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 100443808013
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

ZAIDI, NOORINA
Provider ID: 100431690011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 100293581017
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 100439457013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 100136251024
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 100397112014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN
Provider ID: 100441971009
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 100321174016
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 100446632014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 100297546034
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 100297546023
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927

After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1376705707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 100110456021
Board Certified: 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 CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 100413678013
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1912369273
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 100440955012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

YOUNG, JOCELYN
Provider ID: 100333153010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 100439492015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 100216716021
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 100216716012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 100395245013
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1144615659
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA
Provider ID: 100151228012
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

FORSMAN, SHANA
Provider ID: 100326027003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: N/A

PHYSICIANS ASSISTANT

FORSMAN, SHANA
Provider ID: 100326027003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
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: WC
Website: N/A

PHYSICIANS ASSISTANT

LANDIS, SARAH
Provider ID: 100380954023
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA58826
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: WC
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM
Website: N/A

PHYSICIANS ASSISTANT

LANDIS, SARAH
Provider ID: 100380954022
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

LANDIS, SARAH
Provider ID: 100380954023
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA58826
NPI: 1144733676
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM
Website: N/A

PHYSICIANS ASSISTANT

LY, COURTNIE
Provider ID: 100457129007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62218
NPI: 1538874995
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM
Website: N/A

PHYSICIANS ASSISTANT

LY, COURTNIE
Provider ID: 100457129007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62218
NPI: 1538874995
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-5PM F 8:30AM-5:30PM
Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 100006376014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 100416448013
Board Certified: 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: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SUTTON, BRIAN
Provider ID: 100153781007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

VANETSKY, GARY
Provider ID: 100020780013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PODIATRIST

DUSTIN, ADAM
Provider ID: 100058466009
Board Certified: 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: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

GOMEZ, JUANITA
Provider ID: 100386833011
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

REGISTERED DIETITIAN / NUTRITIONIST

NGUYEN, VUONG
Provider ID: 100459269004
Board Certified: 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: 1316447246
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 100225610012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA
Provider ID: 100299589020
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 100051550011
Board Certified: 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): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY
Provider ID: 100135959026
Board Certified: 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
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 100043066027
Board Certified: 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
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 100441948010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

ESCONDIDO

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 100347956029
Board Certified: 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
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: 100347956033
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIAC ELECTROPHYSIOLOGY

SAWHNEY, NAVINDER
Provider ID: 100097506034
Board Certified: 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
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

BALLOUT, REEM
Provider ID: 100439695003
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CARNEY, AMY
Provider ID: 100351839005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
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: P, EB, IB, E, R, WC
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

CARNEY, AMY
Provider ID: 100351839005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
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: P, EB, IB, E, R, WC
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

DENLINGER, TAMARA
Provider ID: 100459066003
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

690-5900
Provider Gender: Female
NPI: 1699459032
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARGANO-CAMPA, NICOLE
Provider ID: 100457548004
Board Certified: 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
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 100334276022
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 462-2745
After Hours Phone: (760) 520-8100
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN

D. Red de proveedores médicos especialistas

Provider ID: 100318412030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619) 270-3600
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412025
Board Certified: 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: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
550 W WASHINGTON STE 101
ESCONDIDO, CA 92025
Phone: (833) 867-4642
Fax: (760) 446-1373
After Hours Phone: (833) 867-4642
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 466-8600
Fax: (360) 462-2748
After Hours Phone: (760) 466-8600
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JANNESARI, ROYA
Provider ID: 100352459002
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS
Provider ID: 100334990011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS
Provider ID: 100334990011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

CERTIFIED NURSE PRACTITIONER

LINDSEY, SABRINA
Provider ID: 100384424003
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

ODONNELL, NICOLE
Provider ID: 100451250003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SOTO MAYA, ANAYELI
Provider ID: 100459103003
Board Certified: 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: Female
NPI: 1336955525
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 100333696009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
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
Website: N/A

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 100333696009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

CERTIFIED NURSE PRACTITIONER

WALDRUP, LA RHONDA
Provider ID: 100406799007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WALKINS, BETHANY
Provider ID: 100457547013
Board Certified: 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: 1245545581
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN
Provider ID: 100079514007
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CHIROPRACTOR

ROBINSON, DEAN
Provider ID: 100046260005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CHIROPRACTOR

ROBINSON, DEAN
Provider ID: 100046260005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CHIROPRACTOR

ZECHA, RONALD
Provider ID: 100081904025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Provider Gender: Male
License Number: DC28605
NPI: 1427252121
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.ihpsocal.org

CHIROPRACTOR

ZECHA, RONALD
Provider ID: 100081904025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Provider Gender: Male
License Number: DC28605
NPI: 1427252121
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.ihpsocal.org

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 100420058017
Board Certified: 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
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

REALYVASQUEZ, JOHN
Provider ID: 100463697020
Board Certified: 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: 1700464237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN JOAQUIN GENERAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
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: 100364224011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Female
NPI: 1083069611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 100112511032
Board Certified: No
COMMUNITY CARE IPA LLC
330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025
Phone: (760) 489-1323
Fax: (760) 489-0975
After Hours Phone: (760) 489-1323
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

CHEN, ANDREW
Provider ID: 100202420015
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029

D. Red de proveedores médicos especialistas

Phone: (760) 743-0546
Fax: (760) 743-8005
After Hours Phone: (760) 743-0546
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
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 100071303032
Board Certified: 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
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 100071303031
Board Certified: 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
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

HONASOGE, AKILESH
Provider ID: 100471192009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Phone: (760) 294-0480
After Hours Phone: (760) 294-0480
Provider Gender: Male
NPI: 1497118020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 100344561048
Board Certified: 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, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL
Provider ID: 100145578009
Board Certified: 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 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 100143665008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY
Provider ID: 100196389010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 100212423024
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

HAMILTON, ROSS
Provider ID: 100435395029
Board Certified: 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: WC
Hours: M-F

8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

KIM MCMANUS, OLIVIA
Provider ID: 100290462028
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (858) 966-5819
Fax: (760) 294-9274
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1174870067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

ZIMBRIC, MICHAEL
Provider ID: 100041783031
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 100334516012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

D. Red de proveedores médicos especialistas

BANSAL, PREETI
Provider ID: 100042994034
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 100329999026
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 100402237018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

D. Red de proveedores médicos especialistas

MOLL, ANGELA
Provider ID: 100041362035
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 100041362030
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

MUNDAE, RUSDEEP
Provider ID: 100444986017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (619) 427-7755
Fax: (619) 425-2138
After Hours Phone: (619) 427-7755
Provider Gender: Male
NPI: 1811488687
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 100007418038
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 100443808018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

DUONG, NGHI
Provider ID: 100441394017
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093032
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 100421093029
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

ZAIDI, NOORINA
Provider ID: 100431690013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
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: WC
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 100293581026
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 100439457015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

JIANG, WEN
Provider ID: 100106559017
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1659305753
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 100136251022
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 100397112017

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN

Provider ID: 100441971012

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 100027737029

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 100321174017

Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 100321174022
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 100446632016
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 100297546027
Board Certified: 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
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA
Provider ID: 100419888012
Board Certified: 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
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: 100435004016
Board Certified: 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
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: 100365371020
Board Certified: 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
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 100397382009

Board Certified: 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

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PERTL, URSULA

Provider ID: 100072222029

Board Certified: 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: 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: WC

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: 100376522017

Board Certified: 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

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

TODD, SARAH
Provider ID: 100338040021
Board Certified: 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
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: 100198556027
Board Certified: 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
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: 100198556022
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 100110456023
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 100413678015
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1912369273
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 100440955014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

LEVY, AVIYA
Provider ID: 100441433006
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BHUPATHIRAJU, NINA
Provider ID: 100430035021
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2181 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 277-6100
Fax: (224) 633-1935
After Hours Phone: (442) 277-6100
Provider Gender: Female
NPI: 1427498914
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, PALOMAR REHABILITATION INSTITUTE
Medi-Cal Open Panel: Yes
Min/Max Age: 17\99
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE
Provider ID: 100365228008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ABSI, CHRISTIAN
Provider ID: 100439080003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
Provider ID: 100334679006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA52347

NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
Provider ID: 100334679006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

PHYSICIANS ASSISTANT

CAMPBELL, PATRICK
Provider ID: 100440884003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CHENG, ISABEL
Provider ID: 100459125003
Board Certified: 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: Female
NPI: 1578387049
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FONTANILLA, ROBERT
Provider ID: 100453455003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER
Provider ID: 100415819002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

GHASSEMLOU, DANIELLE
Provider ID: 100452749003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NCHOTU, SUCCESS
Provider ID: 100442909003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NIAKAMAL, EVAN
Provider ID: 100389590003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760) 520-8340
Provider Gender: Male
NPI: 1639796873
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 100416448015
Board Certified: 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\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SHARPE, NORMA
Provider ID: 100091046017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

PHYSICIANS ASSISTANT

WALSH, JOHN
Provider ID: 100195869005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PODIATRIST

NEGRON, RICARDO
Provider ID: 100322784017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Website: N/A

PODIATRIST

NEGRON, RICARDO
Provider ID: 100322784017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Website: N/A

PODIATRIST

READ, TRENTON
Provider ID: 100400838013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PODIATRIST

READ, TRENTON
Provider ID: 100400838004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PSYCHOLOGIST

TEETER-WITT, ALYSSA
Provider ID: 100389151005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Provider Gender: Female
NPI: 1932308442
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TEETER-WITT, ALYSSA
Provider ID: 100389151003
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PULMONARY DISEASES

QUAN, MICHELE GRACE
Provider ID: 100353472009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 100009016029
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
Provider ID: 100239950043
Board Certified: 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) 839-7370
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 100239950025
Board Certified: 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: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 100401867008
Board Certified: 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
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 100416078006
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

GROVE, JAY
Provider ID: 100000131017
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY GENERAL VASCULAR

BORJON, AGUSTIN
Provider ID: 100439711007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
Provider ID: 100330164017
Board Certified: No
UCSD MEDICAL GROUP
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790072106
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN
Provider ID: 100454448013
Board Certified: No
UCSD MEDICAL GROUP
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

EDMONDS, ERIC
Provider ID: 100112637037
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

SHIEH, ALVIN
Provider ID: 100412091008
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (858) 485-5071
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 100043066029
Board Certified: 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
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: P, EB, IB, E, R,

T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 100441948015
Board Certified: 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
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

FALLBROOK

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
Provider ID: 100432104019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN

Provider ID: 100398353012

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95020845

NPI: 1942931589

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN

Provider ID: 100398353012

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN

Provider ID: 100398353012

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95020845

NPI: 1942931589

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN

Provider ID: 100398353012

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95020845

NPI: 1942931589

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN

Provider ID: 100398353012

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95020845

NPI: 1942931589

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028

D. Red de proveedores médicos especialistas

Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

GUIDI, CASEY
Provider ID: 100399317002
Board Certified: 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
Accessibility: EB, IB, E, R, T
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409030
Board Certified: 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
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: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

D. Red de proveedores médicos especialistas

KELLEHER, BRIDGET
Provider ID: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100345409018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Female
License Number: NP95003447
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: WC
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409032
Board Certified: 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
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: 100358241008
Board Certified: 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: 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
Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Accessibility: WC
Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
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: WC
Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
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: WC
Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
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: WC
Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
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: WC
Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
- *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: WC
- *Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM*
- *Website: www.vistacommunityclinic.org*

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
Provider ID: 100368543012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*

Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
- *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: WC
- *Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM*
- *Website: www.vistacommunityclinic.org*

CERTIFIED NURSE PRACTITIONER

STOJANOVSKA, JOVANA
Provider ID: 100413318002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 1328 S MISSION RD FALLBROOK, CA 92028
- *Phone: (760) 451-4720*

Fax: (760) 457-4700
- *After Hours Phone: (760) 451-4720*

Provider Gender: Female
NPI: 1215638499
- *Provider English Spoken: Y*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

MILLIRON, ANTHONY
Provider ID: 100459183004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 1328 S MISSION RD FALLBROOK, CA 92028
- *Phone: (760) 451-4720*

Fax: (760) 457-4700
- *After Hours Phone: (760) 451-4720*

Provider Gender: Male
NPI: 1265011084
- *Provider English Spoken: Y*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
- *Hours: M 8:30AM-5:30PM TU-F 8AM-5PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

PEDIATRICS

KIRKLAND, STEPHANIE
Provider ID: 100358241011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*

Fax: (760) 414-3892

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (760) 723-6200
Provider Gender: Female
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRICS

ROBINSON, DAISY
Provider ID: 100052395011
Board Certified: 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: WC
Hours: M-TH 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEMET

PHYSICIANS ASSISTANT

SMITH, KELLI
Provider ID: 100344449003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 100358973004
Board Certified: 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
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: 100413128002
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LUNA, ABIGAIL
Provider ID: 100454852005
Board Certified: 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
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

OCONNELL, STEFANY
Provider ID: 100401596003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OPARA, CHINYERE
Provider ID: 100387177007
Board Certified: 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: 1083221683
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RAJIV, RENUKA
Provider ID: 100454952005
Board Certified: 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
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

WOOLSEY, EMILY
Provider ID: 100458657003
Board Certified: 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: 1861147340
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 100423333007
Board Certified: 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
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: 100451454005
Board Certified: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Hours: M-TH 7AM-7PM F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 100378155011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1407440670
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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: 100378155010
Board Certified: 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: 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
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: 100381855007
Board Certified: 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): N
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: 100418736015
Board Certified: 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
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: 100418736014
Board Certified: 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
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: 100356824015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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: 100356824009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PASCUAL, CHRISTOPHER
Provider ID: 100361481012
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
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: 100008189023
Board Certified: 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
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

VAISMAN, SAMANTHA
Provider ID: 100380415016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VERISSIMO, TAYLOR
Provider ID: 100439741003
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 100357282009
Board Certified: 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: WC
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: 100141935041
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

SILVA ENCISO, JORGE
Provider ID: 100168569026
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

TRAN, HAO
Provider ID: 100104852017
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

UREY, MARCUS
Provider ID: 100321173021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 100330307032
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

AL AZZAWI, SARAH
Provider ID: 100445216010
Board Certified: 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
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ALEXANDER, BRENTON
Provider ID: 100348665006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA
Provider ID: 100405155011
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BHATIA, KARISHMA
Provider ID: 100445299010
Board Certified: 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: 1932764081
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, SPENCER
Provider ID: 100457271014
Board Certified: No
UCSD MEDICAL GROUP
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: 1124656020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, ELSIE
Provider ID: 100445854015
Board Certified: No
UCSD MEDICAL GROUP

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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CABANISS, SCOTT
Provider ID: 100442286015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW
Provider ID: 100033366059
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205966264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN
Provider ID: 100442302015
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CURRAN, BRIAN
Provider ID: 100345258006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

DARWISH, ALEX
Provider ID: 100445321010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FEJLEH, ASHLEY
Provider ID: 100360072006
Board Certified: No
UCSD MEDICAL GROUP
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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FUNDINGSLAND, BRENT
Provider ID: 100042704019
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831166560
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GARRETT, RILEY

Provider ID: 100368456011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE
Provider ID: 100442389015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

HOSALKAR, HETAL
Provider ID: 100002314014
Board Certified: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861556821
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Gujarati, Hindi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 100348070008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

ANESTHESIOLOGY

KAWASAKI, MEGAN
Provider ID: 100446016014
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KIM, ELIZABETH
Provider ID: 100445296010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KROL, CAITLIN
Provider ID: 100445308010
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MALONEY, IAN
Provider ID: 100445287010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEASER, JACQUELINE
Provider ID: 100445222010
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEYER, MEGAN
Provider ID: 100346146006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL
Provider ID: 100368666013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

NGUYEN, QUOC-SY
Provider ID: 100348549006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

OKAMOTO, VINCENT
Provider ID: 100066228004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

OSWALD, JESSICA
Provider ID: 100341848007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SHAW, SUSANNA
Provider ID: 100354657006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1063685477
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SNOW, ERICA
Provider ID: 100445230008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SORIA, CLAIRE
Provider ID: 100349486006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SUYDAM, STEVEN
Provider ID: 100079047052
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TRIVEDI, SURAJ
Provider ID: 100351793006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699057885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, CORONA REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TSUDA, PAIGE
Provider ID: 100361419006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TULLY, JEFFREY
Provider ID: 100359980009
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TZENG, ERIC
Provider ID: 100377120006
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

WANG, MICHELLE
Provider ID: 100379847004
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

YOUNAN, LAWRENCE
Provider ID: 100347401006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ZAERPOOR, DARA
Provider ID: 100445310008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN
Provider ID: 100370717006
Board Certified: No
UCSD MEDICAL GROUP
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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL
Provider ID: 100349686006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

D. Red de proveedores médicos especialistas

DEJULIO, PAUL
Provider ID: 100454394013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON
Provider ID: 100329623030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH
Provider ID: 100321039023
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

BIRS, ANTOINETTE
Provider ID: 100445358005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW
Provider ID: 100379223033
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

DAMANI, SAMIR
Provider ID: 100025094033
Board Certified: 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
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: 100419412027
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

GUPTA, TRIPTI
Provider ID: 100445976005
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

KEEN, WILLIAM
Provider ID: 100386939003
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR

LA JOLLA, CA 92037
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Male
NPI: 1962561571
Provider English Spoken: Y
Cultural Competency: N
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

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 100195767037
Board Certified: 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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 100195767011
Board Certified: 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
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 100220719042
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA

D. Red de proveedores médicos especialistas

Provider ID: 100220719026
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS
Provider ID: 100344257026
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS
Provider ID: 100344257003
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023373040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY
Provider ID: 100405575004
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

TAUB, PAM
Provider ID: 100032433036
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 100329940035
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 100329940022
Board Certified: 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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724063
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724068
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724067
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 100441975033
Board Certified: No
UCSD MEDICAL GROUP
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: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 100441975040
Board Certified: 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

D. Red de proveedores médicos especialistas

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

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 100441975032
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 100445075011
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BOUTELLE, AMY
Provider ID: 100349632003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BRADY, KATELYN
Provider ID: 100340106003
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952797540
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA
Provider ID: 100349784003
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851749253
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER
Provider ID: 100345048007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA
Provider ID: 100334942028
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA
Provider ID: 100334942029
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE
Provider ID: 100152567018
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER
Provider ID: 100339971009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER
Provider ID: 100339971004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 100390636011

D. Red de proveedores médicos especialistas

Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 100350910006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 100350910003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE ANNE
Provider ID: 100235115009
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GIOVANNETTI, ERIN
Provider ID: 100305417014
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009050
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009051
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009046
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009045
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOSHEN, KIRSTEN
Provider ID: 100318031013
Board Certified: No
COMMUNITY CARE IPA LLC
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\100
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GOSHEN, KIRSTEN
Provider ID: 100318031012
Board Certified: 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: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HARKNESS, RUMIKO

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100102986007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

IORIO, ALANNA
Provider ID: 100449961014
Board Certified: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037
Phone: (858) 552-1410
Fax: (760) 452-3344
After Hours Phone: (858) 552-1410
Provider Gender: Female
NPI: 1295556256
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA
Provider ID: 100365110006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA
Provider ID: 100021363010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519020
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673045
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673046
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673041
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673040
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891061966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA
Provider ID: 100337705007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUNRO, KRISTA
Provider ID: 100444345015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN ANGELICA
Provider ID: 100441945007
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN ANGELICA
Provider ID: 100441945010
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN ANGELICA
Provider ID: 100441945015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NACOSTE, LAKEISHA
Provider ID: 100362810003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PATEL, PRIYA
Provider ID: 100454403010
Board Certified: 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

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PATEL, PRIYA
Provider ID: 100454403009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAULSON, KERRY
Provider ID: 100318060004
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RALEIGH, DEBORAH
Provider ID: 100268195019
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROCHE, CHELSEA
Provider ID: 100360859003
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

NPI: 1063040384
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL
Provider ID: 100390999019
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE
Provider ID: 100005508008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA
Provider ID: 100341115006
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

TONG, KIM
Provider ID: 100417849017
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 100365613026
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 100365613025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 100365613028
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PRACTITIONER

TRUJILLO, DALE

Provider ID: 100147247006

Board Certified: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR STE 2B
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1003104423

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA

Provider ID: 100433083017

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 100405552018

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 100355513006

Board Certified: 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: WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA
Provider ID: 100444851013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL
Provider ID: 100454377013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CONRAD, SIMON
Provider ID: 100450489016
Board Certified: No
UCSD MEDICAL GROUP
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
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DAVENPORT, LARIS
Provider ID: 100454810013
Board Certified: No
UCSD MEDICAL GROUP
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
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 100454339015

Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN
Provider ID: 100316930018
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 100442505015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN
Provider ID: 100343590006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA
Provider ID: 100355015014

Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL
Provider ID: 100454594013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LANDON
Provider ID: 100454767013
Board Certified: No
UCSD MEDICAL GROUP
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON
Provider ID: 100442366015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE
Provider ID: 100389451009
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT
Provider ID: 100367777006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SCOTT, TIFFANY
Provider ID: 100445137013
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TOCCO, JESSICA
Provider ID: 100444990013
Board Certified: No
UCSD MEDICAL GROUP
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: 1366836397
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN
Provider ID: 100454439015
Board Certified: No
UCSD MEDICAL GROUP
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: 1366124448
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL
Provider ID: 100445261008
Board Certified: 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: 1548006141
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN
Provider ID: 100079514014
Board Certified: 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: 1861562498
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 100394547008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 100188278012
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA
Provider ID: 100133296007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE
Provider ID: 100173743008
Board Certified: 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
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: 100172955016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 100172955017
Board Certified: 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
Hours: M-TU 8AM-5PM W 8AM-8PM TH-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY
Provider ID: 100411357009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

DANG, TIMOTHY
Provider ID: 100438321009
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

WONG, HENRY
Provider ID: 100446111009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

AMANN, CHRISTOPHER
Provider ID: 100361003006
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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, PIH HEALTH GOOD SAMARITAN HOSPITAL, PIH HEALTH WHITTIER HOSPITAL, PIH HEALTH WHITTIER HOSPITAL, PIH Hospital - Downey
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

AUSTIN, ANDREA
Provider ID: 100324799013
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: SU 12AM-11:59PM
M-F 8AM-5PM
SA 12AM-11:59PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
Provider ID: 100361136009
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801207006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 100360613009
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BLACK, NICHOLAS
Provider ID: 100376992006
Board Certified: 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
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 100389300024
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 100389300022
Board Certified: No
UCSD MEDICAL GROUP
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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 100379966013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 100379966015
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHIN, BRIAN
Provider ID: 100398618012
Board Certified: 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: 1770140782
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

EMERGENCY MEDICINE

COOK, LEANNE

Provider ID: 100446062015

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

COOK, LEANNE

Provider ID: 100446062013

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN

Provider ID: 100247975036

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN

Provider ID: 100247975035

Board Certified: 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: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 100213836042
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

EAGLE, SONJA
Provider ID: 100442336010
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HERSHFIELD, SOLOMIYA
Provider ID: 100438215014
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNA
Provider ID: 100377749010
Board Certified: 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: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNA
Provider ID: 100377749017
Board Certified: No
UCSD MEDICAL GROUP
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: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 100340900008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KRESHAK, ALLYSON
Provider ID: 100022226020
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 100355512010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 100355512016
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAFREE, ANDREW
Provider ID: 100248599035
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 100247892037
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 100247892038
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAVEMAN, EVAN
Provider ID: 100342557115
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAVEMAN, EVAN
Provider ID: 100342557118
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 100173744020
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858) 657-7125
Provider Gender: Female
NPI: 1619014479
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 100173744021
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 100355575041
Board Certified: No
UCSD MEDICAL GROUP
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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 100355575005
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC

Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIPPI, MATTHEW
Provider ID: 100442335010
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH
Provider ID: 100105611051
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH
Provider ID: 100105611050
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MEDAK, ANTHONY
Provider ID: 100082496048
Board Certified: 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 JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN
Provider ID: 100346322005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY
Provider ID: 100377269014
Board Certified: 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): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY
Provider ID: 100377269013
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366478372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

RUDOLF, FRANCES
Provider ID: 100342793008

Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7000
After Hours Phone: (858) 657-7000
Provider Gender: Female
NPI: 1821487430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SABHA, MAHMOUD
Provider ID: 100346850003
Board Certified: 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: WC
Hours: SU 8AM-8PM M-F 8AM-5PM SA 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SAMHA, LEEN
Provider ID: 100445240013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SAMHA, LEEN
Provider ID: 100445240008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SANDIFORD, PATRICK
Provider ID: 100444860013

Board Certified: No
UCSD MEDICAL GROUP
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: 1700151917
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SANDIFORD, PATRICK
Provider ID: 100444860010
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 100067332058
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 100067332057
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

SEGAL, LAUREN
Provider ID: 100446819006
Board Certified: 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: 1013278431
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 100374703021
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 100374703029
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 100374703004
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SHISHLOV, KIRILL
Provider ID: 100285480026
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SLOANE, CHRISTIAN
Provider ID: 100081712041
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 100392087024
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 100392087010
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SNYDER, BRIAN
Provider ID: 100026208045
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 100346340033
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOLBERT, GERALD
Provider ID: 100460159006
Board Certified: 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: 1205079522
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 100072051066
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 100072051063
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TORRES, ERICK
Provider ID: 100446092011
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, COAST PLAZA HOSPITAL, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WARDI, GABRIEL
Provider ID: 100285449073
Board Certified: No
UCSD MEDICAL GROUP
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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WAYMENT, ANDREW
Provider ID: 100431837015
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PALMDALE REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WINKLER, GARRET
Provider ID: 100361210006
Board Certified: 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 THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WITUCKI, PETER
Provider ID: 100050086046
Board Certified: 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: 1548205537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WITUCKI, PETER
Provider ID: 100050086045

Board Certified: No
UCSD MEDICAL GROUP
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: 1548205537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN
Provider ID: 100360199010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN
Provider ID: 100360199007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE
Provider ID: 100408744009
Board Certified: 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
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE
Provider ID: 100408744016
Board Certified: No
UCSD MEDICAL GROUP
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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

DECAMPS, SCARLETT
Provider ID: 100442305010
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

JUANG, PATRICIA
Provider ID: 100189839009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

KULASA, KRISTEN
Provider ID: 100133064009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PETTUS, JEREMY
Provider ID: 100108308010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PHATAK, SONAL
Provider ID: 100106442032
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PHATAK, SONAL
Provider ID: 100106442033
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA
Provider ID: 100106874010
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518163799
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 100339226012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 100339226011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
Provider ID: 100408776027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 100040606013
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1750339446
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 100040606015
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750339446
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 100333867004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

BRANCH, LAUREL
Provider ID: 100445877018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

BRANCH, LAUREL
Provider ID: 100445877019
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN
Provider ID: 100039339016
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN
Provider ID: 100039339009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 100360703007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 100360703004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

D. Red de proveedores médicos especialistas

DZIEGIELEWSKI, CLAUDIA
Provider ID: 100456056008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA
Provider ID: 100456056009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

FEJLEH, MOHAMMAD PHILLIP
Provider ID: 100361080006
Board Certified: 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: 1205240959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, Providence Queen of the Valley Medical Center

GASTROENTEROLOGY

FEJLEH, MOHAMMAD PHILLIP
Provider ID: 100361080003
Board Certified: 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: Male
NPI: 1205240959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, Providence Queen of the Valley Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KRAUSE, AMANDA
Provider ID: 100446081013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KRAUSE, AMANDA
Provider ID: 100446081014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 100445794018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 100445794019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 100446074018
Board Certified: No
UCSD MEDICAL GROUP
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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 100446074019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 100375863012
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 100375863008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

TSAI, MATTHEW
Provider ID: 100353304006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

TSAI, MATTHEW
Provider ID: 100353304003
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285051177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 100405598016
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1265887723
Provider English Spoken: Y
Cultural Competency: N
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

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 100405598018
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1265887723
Provider English Spoken: Y
Cultural Competency: N
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

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 100001887054
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM
Provider ID: 100445329008
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS
Provider ID: 100351654003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHANG, JEREMY
Provider ID: 100450407004
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI
Provider ID: 100419586004
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1245694801
Provider English Spoken: Y
Cultural Competency: N
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

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI
Provider ID: 100419586008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOI, SHARON
Provider ID: 100454563005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOUEIRI, MICHEL
Provider ID: 100213863027
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 471-9186
After Hours Phone: (619) 471-9186
Provider Gender: Male
NPI: 1780991869
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HAMDAN, AYAD
Provider ID: 100347936003

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HELSTEN, TERESA
Provider ID: 100091147027
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 657-8570
After Hours Phone: (858) 657-8570
Provider Gender: Female
NPI: 1265408678
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HELSTEN, TERESA
Provider ID: 100091147028
Board Certified: 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: 1265408678
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN
Provider ID: 100337002010
Board Certified: 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 MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, CITY OF HOPE NATIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: WC
Hours: SU-SA 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN
Provider ID: 100337002012
Board Certified: 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, CITY OF HOPE NATIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN
Provider ID: 100337002011
Board Certified: 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, CITY OF HOPE NATIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

PARK, SOO
Provider ID: 100356168003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE
Provider ID: 100342916003
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700120102

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

STEWART, TYLER
Provider ID: 100349939003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

VU, PETER
Provider ID: 100362638006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN-YOU
Provider ID: 100111838015
Board Certified: Yes
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN-YOU
Provider ID: 100111838021

Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689633729
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 100348239009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 100348239004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 100245868015
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

WINTERS, KATHRYN
Provider ID: 100321722033
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 534-7079
After Hours Phone: (858) 534-7079
Provider Gender: Female
NPI: 1790128924
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

WINTERS, KATHRYN
Provider ID: 100321722031
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 471-9185
After Hours Phone: (619) 471-9185
Provider Gender: Female
NPI: 1790128924
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 100063248014
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1033128376
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 100063248016
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

FIRESTEIN, CATHERINE
Provider ID: 100334021007
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427348382
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

HAMMOND, CHARLES
Provider ID: 100368385006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033641816
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

LE ROUX, MICHELLE
Provider ID: 100442426005
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

TANG, MICHAEL
Provider ID: 100405661006
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA
Provider ID: 100214642012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA
Provider ID: 100214642014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CHENG, GEORGE
Provider ID: 100352502006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 100329385013
Board Certified: No
UCSD MEDICAL GROUP
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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FEUVRIER, ARIANA
Provider ID: 100454707009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FOX, SUTTON
Provider ID: 100445814009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

HOGARTH, MICHAEL
Provider ID: 100030665011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

IBARRA, ALLISON
Provider ID: 100444808008

Board Certified: No
UCSD MEDICAL GROUP
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
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

IVANOV, MARGARET
Provider ID: 100362743003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

JABBOUR, MOUSSA
Provider ID: 100355609003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KATZ, YISRAEL
Provider ID: 100362811006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA
Provider ID: 100320457010

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858) 657-7000

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 100320457013

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 100344845007

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 100344845009

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL
Provider ID: 100363988004
Board Certified: No
UCSD MEDICAL GROUP
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: P, EB, R, T, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MAJITHIA, AMIT
Provider ID: 100354994003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MARINO, NIKOLAS
Provider ID: 100445902009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NGUYEN, MICHELLE
Provider ID: 100442331015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOKES, BRANDON
Provider ID: 100381238007
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487040051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOVIKOV, YEVGENY
Provider ID: 100446877006
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

POTOK, OLIVIA
Provider ID: 100362616003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

QURESHY, ZOYA
Provider ID: 100457259009
Board Certified: No
UCSD MEDICAL GROUP
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: 1457937815
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SAHA, SRISHTI
Provider ID: 100454661008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 100142047014
Board Certified: 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
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 100142047016
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SIRIPHAND, CHRISTOPHER
Provider ID: 100433587012
Board Certified: No
UCSD MEDICAL GROUP
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

D. Red de proveedores médicos especialistas

Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SMITH, CHELSEY
Provider ID: 1003178260 10
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

TAYLOR, DAVID
Provider ID: 100364058006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033572995
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA
Provider ID: 100103437020
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WONG, JUSTIN
Provider ID: 100446034009
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YADLAPATI, RENA
Provider ID: 100344830006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YADLAPATI, RENA
Provider ID: 100344830003
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548597784
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 100366954005
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

ZHANG, SHERRY
Provider ID: 100362540006
Board Certified: 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

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ALOTAIBI, MONA
Provider ID: 100361253003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BARNES, LAURA
Provider ID: 100332627016
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 100018428007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

DEWOLF, SEAN
Provider ID: 100405676010
Board Certified: No
UCSD MEDICAL GROUP
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, 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

HEPOKOSKI, MARK
Provider ID: 100287569020
Board Certified: 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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

IBRAHIM, ISLAM
Provider ID: 100145311026
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

D. Red de proveedores médicos especialistas

JOHN, MIRA
Provider ID: 100442402015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

KAMDAR, BIREN
Provider ID: 100194647037
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LI, JINGHONG
Provider ID: 100173744074
Board Certified: 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: 1619014479
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 100393546022
Board Certified: No
UCSD MEDICAL GROUP
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):

D. Red de proveedores médicos especialistas

N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 100361250009
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PAGE, BRADY
Provider ID: 100433171011
Board Certified: 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: EL CENTRO REGIONAL MEDICAL CENTER, 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

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 100332067017
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 100328938041
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 100328938010
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ANG, LAWRENCE
Provider ID: 100311385020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN
Provider ID: 100437654006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 100400812010
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR
Provider ID: 100025094030
Board Certified: 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
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
Provider ID: 100441942005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, GARY
Provider ID: 100344824014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 100347636012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

REEVES, RYAN
Provider ID: 100202047017
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

SORIA JIMENEZ, CESAR
Provider ID: 100441928005
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, UCSD MEDICAL CTR, HOAG MEMORIAL HOSPITAL PRESBYTERIAN
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

D. Red de proveedores médicos especialistas

TAUB, PAM
Provider ID: 100032433009
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346355161
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TAUB, PAM
Provider ID: 100032433011
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346355161
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TORRES BARBA, DAVID
Provider ID: 100397470016
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 100330307007
Board Certified: 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

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS
Provider ID: 100011710008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 100405600021
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292043
Board Certified: No
UCSD MEDICAL GROUP
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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292042
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 100049168011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 100444865023
Board Certified: No
UCSD MEDICAL GROUP
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
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS
Provider ID: 100061686008
Board Certified: 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, 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 100374854009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

DEL ROSARIO, PAMELA
Provider ID: 100293804009
Board Certified: 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 HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA
Provider ID: 100393994006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

D. Red de proveedores médicos especialistas

MATOBA, NANA
Provider ID: 100403129019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 100403129012
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 100413994018
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

PHAM, BETTY
Provider ID: 100358704014
Board Certified: No
RADY CHILDRENS HEALTH

D. Red de proveedores médicos especialistas

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): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO
Provider ID: 100216712010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 100143665025
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 100143665022
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9888 GENESEE AVE
LA JOLLA, CA 92037
Phone: (858) 626-4123
Fax: (760) 633-7998
After Hours Phone: (858) 626-4123
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEPHROLOGY

RIFKIN, DENA
Provider ID: 100002319028
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

RIFKIN, DENA
Provider ID: 100002319031
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SANCHEZ, AMBER
Provider ID: 100045831028
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SANCHEZ, AMBER
Provider ID: 100045831031
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SANCHEZ, AMBER
Provider ID: 100045831034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GHOLIPOUR, TAHA
Provider ID: 100422147015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

HAMILTON, ROSS
Provider ID: 100435395030
Board Certified: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Phone: (760) 631-3000
Fax: (760) 631-3007

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

ILICETO, ALESSANDRO
Provider ID: 100445893009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE
Provider ID: 100069645011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 100441982020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA
Provider ID: 100042901032
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID
Provider ID: 100334049007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

MAHTA, ALI
Provider ID: 100450690008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI
Provider ID: 100376947010
Board Certified: 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 JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI
Provider ID: 100376947005

Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SCHULTE, JESSICA
Provider ID: 100346079009
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (858) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1467870576
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 100285667035
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

TECOMA, EVELYN
Provider ID: 100032777030
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

UNG, HOAMENG
Provider ID: 100442265010
Board Certified: No
UCSD MEDICAL GROUP
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: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

WU, VICTORIA
Provider ID: 100413006016
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 100047044026
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 100047044031
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

Provider ID: 100441980036

Board Certified: 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

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

Provider ID: 100441980040

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 100306202023

Board Certified: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 100306202021

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE

Provider ID: 100349544021

Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 100441933006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 100441933014
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964027
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 100368821008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 100368821014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 100334516017
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 100333754004
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 100333754024
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927034
Board Certified: No
UCSD MEDICAL GROUP

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): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA
Provider ID: 100379086008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA
Provider ID: 100379086005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA
Provider ID: 100405680016
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA
Provider ID: 100445943014
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PENALOSA, PATRICK
Provider ID: 100445822010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PENALOSA, PATRICK
Provider ID: 100445822009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 100322103022
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 100322103020
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

FARBER, EMILY
Provider ID: 100320774006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

LIPARI, RACHEL
Provider ID: 100397073012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR
Provider ID: 100385886004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

PARKER, LESLIE
Provider ID: 100441965005
Board Certified: 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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

SOROKIN, LISA
Provider ID: 100150801007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

ALLEN, RACHAEL
Provider ID: 100454131007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
9834 GENESEE AVE STE 200
LA JOLLA, CA 92037
Phone: (800) 765-2737
Fax: (858) 450-9451
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BAXTER, SALLY
Provider ID: 100362689004
Board Certified: 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: WC
Hours: M-F 7AM-5PM SA 7:45AM-2PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 100446792013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 100446792021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 100446792022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 100446792027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 100445809021
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 100445809023
Board Certified: 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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 100445809024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 100446906012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 100446906015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 100446795008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HSUEH, JESSICA

Provider ID: 100446795010
Board Certified: 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: 1952927584
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 100441934017
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 100441934020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 100445977013
Board Certified: No
UCSD MEDICAL GROUP

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: 1124641071
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 100445977014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PUIG-LLANO, MANUEL
Provider ID: 100077505010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL
Provider ID: 100446001018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL
Provider ID: 100446001019
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

DUONG, NGHI
Provider ID: 100441394014
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

HOO, PAMELA
Provider ID: 100011777009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

HOO, PAMELA
Provider ID: 100011777034
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 100405512007
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 100405512009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

KIM, PHILIP
Provider ID: 100374880024
Board Certified: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Male
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

MCCLEAN, ESMERALDA
Provider ID: 100290589005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

VO, ANDREW
Provider ID: 100333683031
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

VO, ANDREW
Provider ID: 100333683004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 100356621024
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 100356621029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 100356621003
Board Certified: 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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839041
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839046
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839043
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839042
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714052
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714048
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932297330
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714047
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932297330
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714051
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801056
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801051
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801052
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801050
Board Certified: 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: WC

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702048
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702043
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702042
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702047
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164054
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164050
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164049
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164053
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164054
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135048
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135049
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135045
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135044
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB
Provider ID: 100146630017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967043
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967083
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967084
Board Certified: No

UCSD MEDICAL GROUP
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
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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967078
Board Certified: 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 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967080
Board Certified: 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 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625045
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625046
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625041
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625040
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

PEREZ, ANGEL
Provider ID: 100445330006
Board Certified: 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
Min/Max Age: 0\None

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642065
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642061
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642060
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642059
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-6197

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (858) 822-6197
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248054
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248048
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248050
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248053
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368053
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368057
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368052
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368054

Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366590853
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 100319364036
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 100319364043
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 100319364006
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR STE LLA
LA JOLLA, CA 92037
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 100319364020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

FADARE, OLUWOLE
Provider ID: 100214619008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

HANSEN, LAWRENCE
Provider ID: 100038005009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA
Provider ID: 100009931013
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PATEL, CHARMI
Provider ID: 100357459003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD
Provider ID: 100349413007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO
Provider ID: 100332804004
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043571045
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO
Provider ID: 100332804008
Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043571045
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH
Provider ID: 100334228007
Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174814065
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
Provider ID: 100077431013
Board Certified: 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

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 100206017012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE
Provider ID: 100352032003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE
Provider ID: 100352032007
Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205288396
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING

Provider ID: 100349970003

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING

Provider ID: 100349970006

Board Certified: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538574744

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES

Provider ID: 100306679008

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED

Provider ID: 100089383011

Board Certified: 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

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA
Provider ID: 100229865009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE
Provider ID: 100333030008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE
Provider ID: 100333030004
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZHANG, HAIYAN
Provider ID: 100333231008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZHANG, HAIYAN
Provider ID: 100333231004
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1457617110
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL
Provider ID: 100047349013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 100198516035
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 100198516011
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 100441411016
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: Rady Childrens Health

Network, UCSD Medical Group

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY
Provider ID: 100377311006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ARMEEN, GARY
Provider ID: 100141496008
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1760774863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BOYD, LISA
Provider ID: 100343639006
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE
Provider ID: 100354784004
Board Certified: 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):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CHERRY, REENA
Provider ID: 100349521003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CHERRY, REENA
Provider ID: 100349521008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

COOKISH, DAVID
Provider ID: 100380991003
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CRIPE, TAYLOR
Provider ID: 100341163003
Board Certified: No
UCSD MEDICAL GROUP
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
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

DEMASCO, MICHAEL
Provider ID: 100368886003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

DEMOOR, PATRICIA
Provider ID: 100341926003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
Provider ID: 100433834018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HARVEY-SCHMIDT, JOSEPH
Provider ID: 100370779006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 100352106006
Board Certified: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225698962
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER
Provider ID: 100439055011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER
Provider ID: 100439055009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LIN, JOYCE
Provider ID: 100358578006
Board Certified: 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

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LIN, JOYCE
Provider ID: 100358578003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUONG, TRAN
Provider ID: 100299352007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUONG, TRAN
Provider ID: 100299352009
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1821532292
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

D. Red de proveedores médicos especialistas

LUU, JACKIE
Provider ID: 100336923007
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 100425219009
Board Certified: 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: WC
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 100425219008
Board Certified: 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: WC
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 100425219020
Board Certified: 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
Accessibility: WC
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MERRILL, COREY
Provider ID: 100352082007
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Provider Gender: Male
NPI: 1386032308
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

OKADA, MICHELLE
Provider ID: 100367792006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

OKADA, MICHELLE
Provider ID: 100367792004
Board Certified: No
UCSD MEDICAL GROUP
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
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 100006376012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 100006376009
Board Certified: No

D. Red de proveedores médicos especialistas

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: WC
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 100375208005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 100375208008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 100353948007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 100353948009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROMO, JORGE
Provider ID: 100200849009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SANCHEZ, MICHAEL
Provider ID: 100338953003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SERHAN, STEPHANIE
Provider ID: 100444862013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR
Provider ID: 100340580012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR
Provider ID: 100340580016
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR
Provider ID: 100340580017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 100058009020
Board Certified: No
UCSD MEDICAL GROUP
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: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 100444836015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 100444836018

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 100317902043
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 100317902019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 100317902041
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 100147024021
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BOOTH, CHRISTOPHER
Provider ID: 100340187003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BOOTH, CHRISTOPHER
Provider ID: 100340187006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BRENNER, EINAT
Provider ID: 100465936014
Board Certified: No
UCSD MEDICAL GROUP
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: 1679351274
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BRENNER, EINAT
Provider ID: 100465936015
Board Certified: 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: 1679351274
Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

CHESHER, NICHOLAS
Provider ID: 100333532007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

CRANDAL, BRENT
Provider ID: 100387008005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

DUARTE, KRISTEN
Provider ID: 100354725003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

DUARTE, KRISTEN
Provider ID: 100354725006
Board Certified: 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

D. Red de proveedores médicos especialistas

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

EGAN, KAITLYN
Provider ID: 100441961005
Board Certified: 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: 1629653860
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

LASSWELL, EVE
Provider ID: 100339815003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

MENDEZ, ANDRES
Provider ID: 100368994003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

PELHAM, WILLIAM
Provider ID: 100433443006
Board Certified: No
UCSD MEDICAL GROUP
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

PERRY, WILLIAM
Provider ID: 100013464046
Board Certified: 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: 1801811195
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, 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

PSYCHOLOGIST

PERRY, WILLIAM
Provider ID: 100013464013
Board Certified: 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: 1801811195
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

TARLE, STEPHANIE
Provider ID: 100419661007
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

THOMAS, KELSEY
Provider ID: 100439092004
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

THOMAS, KELSEY
Provider ID: 100439092011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

ZLATAR, ZVINKA
Provider ID: 100306002007
Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497139059
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 100405060018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

CYPRO, ALEXANDER
Provider ID: 100446834006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA
Provider ID: 100344510004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 100362595024
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

VAN NOSTRAND, KERIANN
Provider ID: 100461809014
Board Certified: No
UCSD MEDICAL GROUP
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: 1821251406
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

GURAM, KRIPA
Provider ID: 100453163011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

GURAM, KRIPA
Provider ID: 100453163010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

HOPPER, AUSTIN
Provider ID: 100445306006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

HOPPER, AUSTIN
Provider ID: 100445306008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

LUI, ASONA
Provider ID: 100442283010
Board Certified: 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: 1104487446
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

RADIATION ONCOLOGY

LUI, ASONA
Provider ID: 100442283009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
Provider ID: 100392620022
Board Certified: No
UCSD MEDICAL GROUP
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, UCSD MEDICAL CTR, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
Provider ID: 100433036016
Board Certified: No
UCSD MEDICAL GROUP
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, VALLEY CHILDRENS HOSPITAL, 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

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY
Provider ID: 100359942006
Board Certified: No
UCSD MEDICAL GROUP
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: P, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BISSET, LOGAN

Provider ID: 100433049018
Board Certified: No
UCSD MEDICAL GROUP
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: 1356760276
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, VALLEY CHILDRENS HOSPITAL, UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER

Provider ID: 100445846023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER

Provider ID: 100445846024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BONE, SAMUEL

Provider ID: 100431848025
Board Certified: No
UCSD MEDICAL GROUP
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, Highland Hospital, 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

RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 100375465008
Board Certified: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851770622
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BROWN, TERESA
Provider ID: 100430621020
Board Certified: No
UCSD MEDICAL GROUP
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: Highland Hospital, Alameda Hospital, 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

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE
Provider ID: 100434747023
Board Certified: No
UCSD MEDICAL GROUP
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, ANTELOPE VALLEY HOSP MED CTR, Highland Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 100356713025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 100374799007
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA
Provider ID: 100446112023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA
Provider ID: 100446112024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 100445834023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 100445834024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 100446028023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 100446028024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 100405558018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY
Provider ID: 100007540016
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 100332906007

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: SU 12AM-11:59PM M-F 8AM-5PM SA 12AM-11:59PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GERST, SCOTT

Provider ID: 100409684016

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE

Provider ID: 100442391024

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE

Provider ID: 100442391025

Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY
Provider ID: 100361287006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720465396
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY
Provider ID: 100374256007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST
Provider ID: 100010171025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HENNEMEYER, CHARLES
Provider ID: 100049087060
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HENNEMEYER, CHARLES
Provider ID: 100049087063
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 100446035023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 100446035024
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 100215758022
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 100445948023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 100445948024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN
Provider ID: 100433802013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN
Provider ID: 100433802026
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 100374722007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 100445953023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 100445953024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MANDT, TYLER
Provider ID: 100463168028
Board Certified: No
UCSD MEDICAL GROUP
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: 1548793888
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MANDT, TYLER
Provider ID: 100463168029
Board Certified: 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: 1548793888
Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 100368313024
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952389934
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST MARY MEDICAL CENTER, 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

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 100374877007
Board Certified: No
UCSD MEDICAL GROUP
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: 1871957308
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 100374877045
Board Certified: 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: 1871957308
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO
Provider ID: 100445784023
Board Certified: No
UCSD MEDICAL GROUP
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

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO
Provider ID: 100445784024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PARIKH, RUPAL
Provider ID: 100397645008
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (539) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1154770543
Provider English Spoken: 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

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL
Provider ID: 100416732025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL
Provider ID: 100416732026
Board Certified: 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 Health Care, 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

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL
Provider ID: 100416732026
Board Certified: 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 Health Care, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER
Provider ID: 100141222035
Board Certified: No
UCSD MEDICAL GROUP
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, UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 100445925023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 100445925024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 100445901023
Board Certified: No
UCSD MEDICAL GROUP
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
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 100445901024
Board Certified: 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
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROZELL, JOSEPH
Provider ID: 100393606019
Board Certified: No
UCSD MEDICAL GROUP
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, VALLEY CHILDRENS HOSPITAL, 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

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 100408738019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER
Provider ID: 100346717007
Board Certified: 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
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM
Provider ID: 100405537021
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 100445947023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 100445947024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY
Provider ID: 100374872007
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA

Provider ID: 100446088023

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA

Provider ID: 100446088024

Board Certified: 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: 1366901662

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 100000933018

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 100000933035

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 100422209016

Board Certified: No

UCSD MEDICAL GROUP

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 100330031044
Board Certified: 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 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 100330031047
Board Certified: 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 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 100346792008
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY
Provider ID: 100317784016
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 100408860013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 100412064015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WELSH, RAYMOND
Provider ID: 100442112019
Board Certified: No
UCSD MEDICAL GROUP
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, DESERT REGIONAL MED CTR, HI DESERT MEDICAL CENTER, JOHN F KENNEDY MEMORIAL HOSP, PALMDALE REGIONAL MEDICAL CENTER, PROVIDENCE SAINT JOSEPH MED CTR, RIDGECREST REGIONAL HOSPITAL, RIDGECREST REGIONAL HOSPITAL, UCI HEALTH-FOUNTAIN VALLEY, UCI HEALTH-LAKEWOOD, VENTURA COUNTY MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 100446104023
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 100446104024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAMORA, JESUS
Provider ID: 100347655059
Board Certified: No
UCSD MEDICAL GROUP
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: 1457525578
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PROVIDENCE LITTLE CO OF MARY MED CTR SAN PEDRO, PROVIDENCE LITTLE CO OF MARY MED CTR TORRANCE, REDLANDS COMMUNITY HOSP, UCI HEALTH-LOS ALAMITOS, VALLEY CHILDRENS HOSPITAL, ANTELOPE VALLEY HOSP MED CTR, Highland Hospital, Highland Hospital, Eisenhower Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN /

D. Red de proveedores médicos especialistas

NUTRITIONIST

NGUYEN, VUONG

Provider ID: 100459269006

Board Certified: 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: 1316447246

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE

Provider ID: 100359207003

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BALL, STEPHEN

Provider ID: 100332393026

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK

Provider ID: 100222781006

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK

Provider ID: 100222781012

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BOEHMER, ALEXANDRA
Provider ID: 100441981008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 100198139020
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

DIAL, PEI SHIH
Provider ID: 100342752003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

REGISTERED PHYSICAL THERAPIST

DIAL, PEI SHIH

Provider ID: 100342752007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

HOUSELY, ALEXIS

Provider ID: 100385236007
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MAROLLA, ALICE

Provider ID: 100347780003
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477018729
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 100339447004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER
Provider ID: 100339447011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE
Provider ID: 100166713007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY
Provider ID: 100321762010
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855) 543-0333
Provider Gender: Male
NPI: 1740708478
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY
Provider ID: 100321762012
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN
Provider ID: 100337116004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN
Provider ID: 100337116007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY
Provider ID: 100146888007
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

YU, AUDRINE ALANNA
Provider ID: 100336834006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN
Provider ID: 100386671012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN
Provider ID: 100386671009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

UNGER, LINDSEY
Provider ID: 100339243008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI
Provider ID: 100363220006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE
Provider ID: 100320727013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 100225610011
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235369067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA
Provider ID: 100082727011
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA
Provider ID: 100376974006
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

POTENZA, BRUCE
Provider ID: 100036785011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE
Provider ID: 100376993006
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548604648
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA
Provider ID: 100299589019

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

BORTZ, PASCAL
Provider ID: 100363724012
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CLARY, BRYAN
Provider ID: 100225211007
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HOLLANDSWORTH, HANNAH
Provider ID: 100441332004
Board Certified: No
UCSD MEDICAL GROUP
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: 1972954303
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

D. Red de proveedores médicos especialistas

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 100051550007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANTORELLI, JARRETT
Provider ID: 100362047006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SIMEONE, DIANE
Provider ID: 100441968005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL VASCULAR

GAFFEY, ANN
Provider ID: 100381666003
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL VASCULAR

HOWE, STEVEN
Provider ID: 100221170012
Board Certified: 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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL
Provider ID: 100377441008
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL
Provider ID: 100377441012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEAUMONT, THOMAS
Provider ID: 100342515003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 100333991007
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942469663
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, HOAG HOSPITAL IRVINE, 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD
Provider ID: 100002342074
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
Provider ID: 100330164023
Board Certified: No
UCSD MEDICAL GROUP
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, TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN
Provider ID: 100454448014
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

KHANNA, ARJUN
Provider ID: 100412933010
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

KHANNA, ARJUN
Provider ID: 100412933011
Board Certified: 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: 1780079954
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE
Provider ID: 100010996011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
Provider ID: 100405559010
Board Certified: No

UCSD MEDICAL GROUP
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, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
Provider ID: 100405559012
Board Certified: 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, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH
Provider ID: 100348282004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH
Provider ID: 100348282007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 100332790013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

U, HOI
Provider ID: 100009655010
Board Certified: Yes
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1164468146
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN
Provider ID: 100446080013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN
Provider ID: 100446080014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUKATA, SUSAN
Provider ID: 100169604014
Board Certified: 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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK
Provider ID: 100350327006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHOI, JIHOON
Provider ID: 100377335007
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHOI, JIHOON
Provider ID: 100377335005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 100445888013

Board Certified: No
UCSD MEDICAL GROUP
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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 100445888014
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DIJANIC, CHRISTOPHER
Provider ID: 100445828013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DIJANIC, CHRISTOPHER
Provider ID: 100445828014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DWIGHT, KATHRYN
Provider ID: 100454340013
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DWIGHT, KATHRYN
Provider ID: 100454340014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GEORGE, JOSE
Provider ID: 100446008013
Board Certified: No
UCSD MEDICAL GROUP
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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GEORGE, JOSE
Provider ID: 100446008014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK
Provider ID: 100377339007
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK
Provider ID: 100377339005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

HURVITZ, ANDREW
Provider ID: 100442456019
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

MITCHELL, JOSEPH
Provider ID: 100361146007
Board Certified: No
UCSD MEDICAL GROUP
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: 1699161471
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

MITCHELL, JOSEPH
Provider ID: 100361146004
Board Certified: 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: 1699161471
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
Provider ID: 100445865013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
Provider ID: 100445865014
Board Certified: 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: 1144783028
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SEDGHI, SOUDABEH
Provider ID: 100445840013
Board Certified: No
UCSD MEDICAL GROUP
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
Hospital Affiliation: CHILDRENS HOSPITAL AT MISSION
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SEDGHI, SOUDABEH
Provider ID: 100445840014
Board Certified: 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
Hospital Affiliation: CHILDRENS HOSPITAL AT MISSION
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY PLASTIC

HINCHCLIFF, KATHARINE
Provider ID: 100366951006

Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY THORACIC

BOYS, JOSHUA
Provider ID: 100349656003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

HOWE, STEVEN
Provider ID: 100221170052
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK
Provider ID: 100354468007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK
Provider ID: 100354468026
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK
Provider ID: 100354468009
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (858) 647-8817
Fax: (858) 853-9878
After Hours Phone: (858) 647-8817
Provider Gender: Male
NPI: 1033683719
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 100334675025
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
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
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 100334675004
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

RAMIREZ, ALFREDO
Provider ID: 100355532003
Board Certified: 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: P, EB, IB, E, R
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

BAGRODIA, ADITYA
Provider ID: 100379858004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

CRAWFORD, ELWARD
Provider ID: 100350084003
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 657-7876
Fax: (888) 539-8781
After Hours Phone: (858) 657-7876
Provider Gender: Male
NPI: 1902814379
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

UROLOGY

KADER, ANDREW
Provider ID: 100141779022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

UROLOGY

KANE, CHRISTOPHER
Provider ID: 100060222031
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM
Provider ID: 100014500006
Board Certified: 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: P, EB, IB, E, R, T
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA
Provider ID: 100026002009
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
5565 GROSSMONT CENTER DR STE 202
LA MESA, CA 91942
Phone: (619) 377-6262
After Hours Phone: (619) 377-6262
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: WC
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI
Provider ID: 100109936039
Board Certified: 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 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HOERRES, LYNN
Provider ID: 100449858011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
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: Female
NPI: 1689226508
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\99
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 100112511035
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HOSPITALIST MD/DO

KUPELIAN, CHLOE
Provider ID: 100379318007
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INTERNAL MEDICINE

YELLEN, LAURENCE
Provider ID: 100035599008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

HONASOGE, AKILESH
Provider ID: 100471192008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
8898 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 439-2464
After Hours Phone: (619)

439-2464
Provider Gender: Male
NPI: 1497118020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD
Provider ID: 100246104008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 100436521008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 100436521012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 100209679066
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 100209679076
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 100209679068
Board Certified: 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
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 100209679086
Board Certified: 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
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OTOLARYNGOLOGY

MOSHTAGHI, OMID
Provider ID: 100411218008
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

MOSHTAGHI, OMID
Provider ID: 100411218026
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

SAID, MENA
Provider ID: 100431590014
Board Certified: 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

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

WHITE, KYLE
Provider ID: 100401949009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 100388410015
Board Certified: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499
After Hours Phone: (619) 740-4500
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 100009016028
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

LAKESIDE

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Fax: (360) 462-2744
After Hours Phone: (858) 218-3000
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335006
Board Certified: 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: EB, IB, E, R
Hours: M-F 8AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

CHIROPRACTOR

PAGE, BIANCA
Provider ID: 100333966007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

PAGE, BIANCA
Provider ID: 100333966007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

LEMON GROVE

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 100358973001
Board Certified: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Provider Gender: Female
License Number: NP95009933
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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 100358973001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Provider Gender: Female
License Number: NP95009933
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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, WC
Hours: M-F 9AM-5PM
Website: N/A

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 100334501003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 9AM-5PM
Website: N/A

PHYSICIANS ASSISTANT

FLEMING, DAVID
Provider ID: 100334501003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 9AM-5PM
Website: N/A

MENIFEE

PHYSICIANS ASSISTANT

SMITH, KELLI
Provider ID: 100344449005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 100348070012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 100370717022

Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK

Provider ID: 100332796016

Board Certified: No

UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427255967

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

Provider ID: 100334276015

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 100145652007

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

D. Red de proveedores médicos especialistas

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
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: 100341057003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA
Provider ID: 100341115003
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346696044
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SYED-UDDIN, SUMIYAH
Provider ID: 100403982003
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WALKINS, BETHANY
Provider ID: 100457547012
Board Certified: 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: 1245545581
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 100389300009
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 100173744025
Board Certified: 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
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 100113987016
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PATEL, SAGAR
Provider ID: 100374350006
Board Certified: No
UCSD MEDICAL GROUP
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 677-9757
After Hours Phone: (951) 696-6000
Provider Gender: Male
NPI: 1245672302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 100332067013
Board Certified: 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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 100332067006
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 100328938011
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 100330307009
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1063701068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 100413994014
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 100397293007
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 100212423029
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GOLD, JEFFREY
Provider ID: 100212423019
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE
Provider ID: 100293954014
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1528353521
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA
Provider ID: 100290462024
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 100042994030
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 100329999016
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 100402237009
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 100041362031
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946017
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 100007418034
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 100443808009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 100293581022
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CARVALHO, DANIELA
Provider ID: 100111076018
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1154492916
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 100439457012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

OTOLARYNGOLOGY

JIANG, WEN
Provider ID: 100106559020
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967025
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967027
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 100397112013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN
Provider ID: 100441971007
Board Certified: 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
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO
Provider ID: 100376287003
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1114277787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER
Provider ID: 100027737023
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN
Provider ID: 100332559021
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 100446632013
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL
Provider ID: 100219076012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 100297546021
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW
Provider ID: 100247116007
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1831423250
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
Provider ID: 100057498004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE
Provider ID: 100343545003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Female
NPI: 1750513644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO,

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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA
Provider ID: 100417084008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE STE 150
MURRIETA, CA 92562
Phone: (858) 966-7800
Fax: (858) 966-8231
After Hours Phone: (858) 966-7800
Provider Gender: Female
NPI: 1609495399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN
Provider ID: 100365221006
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6161
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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID
Provider ID: 100416724006
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Male
NPI: 1194145946
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, 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
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI
Provider ID: 100376572009
Board Certified: 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, 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN
Provider ID: 100416430006
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA
Provider ID: 100343547009
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RAWANI-PATEL, PRITI
Provider ID: 100465172005
Board Certified: 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: 1376957027
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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SADRE, SARAH
Provider ID: 100472511008
Board Certified: 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: 1972169845
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\19
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE
Provider ID: 100349875006
Board Certified: 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 RANCHO

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA
Provider ID: 100352939006
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
Provider ID: 100166031009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW
Provider ID: 100395379006
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA
Provider ID: 100350518009
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VEGA, CAROLINA
Provider ID: 100439174004
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

YIM, WESLEY
Provider ID: 100469211006
Board Certified: 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: Male
NPI: 1457988537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 100110456020
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA
Provider ID: 100419234006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 100413678012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 100440955009
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

JAZAYERI, AMIR
Provider ID: 100441879005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SHARMA, ANITA
Provider ID: 100443393005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 100439492014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 100395245012
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1144615659
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA
Provider ID: 100325259012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

PHADKE, OMKAR
Provider ID: 100452392006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

LOPEZ, XIMENA
Provider ID: 100419308005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI
Provider ID: 100068402018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PATTERSON, MARY
Provider ID: 100236163012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

VARGAS TRUJILLO, MARCELA
Provider ID: 100258755008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1952534091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY
Provider ID: 100324507007
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN
Provider ID: 100323974008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA
Provider ID: 100218804010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

D. Red de proveedores médicos especialistas

RYAN, KYLE
Provider ID: 100365228011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE
Provider ID: 100190325033
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW
Provider ID: 100047579012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 100416448012
Board Certified: 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

D. Red de proveedores médicos especialistas

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PULMONARY DISEASES

KUMAR, AVNEE
Provider ID: 100405584007
Board Certified: No
UCSD MEDICAL GROUP
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750745394
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: 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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 100362595028
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

SURI, RAJAT
Provider ID: 100374886006
Board Certified: 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: P, E, R, T, WC, PA

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

FAIRBANKS, TIMOTHY
Provider ID: 100135959025
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

KLING, KAREN
Provider ID: 100043066030
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL VASCULAR

HOWE, STEVEN
Provider ID: 100221170014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHENG, YU-TSUN
Provider ID: 100046358018
Board Certified: No

RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1992982854
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN
Provider ID: 100256000008
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 100441948009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

HOWE, STEVEN
Provider ID: 100221170018
Board Certified: 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
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 100334675007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NATIONAL CITY

CARDIOVASCULAR DISEASE

DAMANI, SAMIR
Provider ID: 100025094034
Board Certified: 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
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 100333694014
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
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: P, EB, IB, E, R, T, WC
Hours: M-TH 8AM-6PM F 8AM-5PM
Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 100333694002

D. Red de proveedores médicos especialistas

Board Certified: No

OPERATION SAMAHAN

2101 GRANGER AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Hours: M-F 8AM-5PM

Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

Provider ID: 100333694014

Board Certified: No

OPERATION SAMAHAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Hours: M-TH 8AM-6PM F 8AM-5PM

Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

Provider ID: 100333694002

Board Certified: No

OPERATION SAMAHAN

2101 GRANGER AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Hours: M-F 8AM-5PM

Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

BIMSTEIN, JAIME

Provider ID: 100457622006

Board Certified: 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

Provider Gender: Male

NPI: 1730430844

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CUNNINGHAM, ISIS
Provider ID: 100415795003
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
Provider ID: 100353724004
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
Provider ID: 100353724004
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
Provider ID: 100360073017
Board Certified: No
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
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684

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: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
Provider ID: 100360073017
Board Certified: No
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
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
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: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

FERNANDO, JENNIFER
Provider ID: 100460124003
Board Certified: No
COMMUNITY CARE IPA LLC
2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1346259611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TH 8AM-6PM F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

GULLY, MICHELLE
Provider ID: 100407971002
Board Certified: 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
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, KINDRED HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

KIM, YUNMI
Provider ID: 100446291004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
Provider ID: 100334142008
Board Certified: 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
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

LIM, IMELDA
Provider ID: 100334142005
Board Certified: No
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95000203
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
Hours: M-F 8AM-5PM
Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
Provider ID: 100334142003
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95000203
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: P, EB, IB, E, R, T, WC
Hours: M-TH 8AM-6PM F 8AM-5PM
Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
Provider ID: 100334142005
Board Certified: No
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426

D. Red de proveedores médicos especialistas

Provider Gender: Female
License Number: NP95000203
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
Hours: M-F 8AM-5PM
Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
Provider ID: 100334142003
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95000203
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: P, EB, IB, E, R, T, WC
Hours: M-TH 8AM-6PM
F 8AM-5PM
Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH
Provider ID: 100342623002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH
Provider ID: 100342623002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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
Website: www.fhcsd.org

CERTIFIED NURSE

D. Red de proveedores médicos especialistas

PRACTITIONER

MCCULLOUGH, LYAN LOVE

Provider ID: 100433423003

Board Certified: 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, KINDRED HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-TH 8AM-6PM F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MCCULLOUGH, LYAN LOVE

Provider ID: 100433423005

Board Certified: No

OPERATION SAMAHAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-2284

After Hours Phone: (619) 474-2284

Provider Gender: Female

License Number: NP95028990

NPI: 1063759181

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, KINDRED HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

MCCULLOUGH, LYAN LOVE

Provider ID: 100433423005

Board Certified: No

OPERATION SAMAHAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-2284

After Hours Phone: (619) 474-2284

Provider Gender: Female

License Number: NP95028990

NPI: 1063759181

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, KINDRED HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 100415584009

Board Certified: No

COMMUNITY CARE IPA LLC

2835 HIGHLAND AVE STE A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
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: 100415584006
Board Certified: 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
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

NINER, JEANNE
Provider ID: 100458628003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
502 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Phone: (619) 475-6204
After Hours Phone: (619) 475-6204
Provider Gender: Female
NPI: 1558699769
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR
Provider ID: 100344345026
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 474-2284
After Hours Phone: (619) 474-2284
Provider Gender: Male
License Number: NP95010779
NPI: 1124486865
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish, 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: P, EB, IB, E, R, T, WC
Website: www.opsamheath .org

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 100344345026

Board Certified: No

OPERATION SAMAHAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-2284

After Hours Phone: (619) 474-2284

Provider Gender: Male

License Number: NP95010779

NPI: 1124486865

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, Spanish, 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: P, EB, IB, E, R, T, WC

Website: www.opsamheath.org

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 100246128006

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619) 434-7308

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

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

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

Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 100246128006

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619) 434-7308

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

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

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

Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REAL, MARIA

Provider ID: 100333899002

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619) 434-7308

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

Provider English Spoken: Y

Provider Language(s) Spoken: Catalan, German, Spanish

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REAL, MARIA
Provider ID: 100333899002
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REID, EMILY
Provider ID: 100334050001
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REID, EMILY
Provider ID: 100334050001
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 100246149005
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA
Provider ID: 100246149005
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
Provider ID: 100334655004
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
Provider ID: 100334655004
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

D. Red de proveedores médicos especialistas

Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
Provider ID: 100334173003
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
Provider ID: 100334173003
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 100112203014
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.opsamheath.org

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 100112203014
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R,

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

T, WC
Website: www.opsamheath .org

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335009
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Male
License Number: DC29314
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: P, EB, IB, E, R, T, WC
Hours: TH 8AM-2PM
Website: www.lamaestra.org

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335009
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Male
License Number: DC29314
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: P, EB, IB, E, R, T, WC
Hours: TH 8AM-2PM
Website: www.lamaestra.org

FAMILY PRACTICE

MEDINA, ALEXANDER
Provider ID: 100325216029
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROBERTS, POMAI
Provider ID: 100323487009
Board Certified: 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: EB, IB, E, R
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: 100438861008
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

TRAN, KIM
Provider ID: 100438861009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208027
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208027
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

INTERNAL MEDICINE

THAYER, KARISA
Provider ID: 100438880005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR
Provider ID: 100025094031
Board Certified: 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
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: 100317135014
Board Certified: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Phone: (619) 512-1915
Fax: (619) 512-1913
After Hours Phone: (619) 512-1915
Provider Gender: Male
NPI: 1407997406
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

CANTU-REYNA, GUILLERMO
Provider ID: 100214575003
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 798-3977
After Hours Phone: (619) 798-3977
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

NEUROLOGY

CANTU-REYNA, GUILLERMO
Provider ID: 100214575003
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 798-3977
After Hours Phone: (619) 798-3977
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN
Provider ID: 100002504022
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
NPI: 1255643474
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
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: 100002504019
Board Certified: 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: WC
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: 100002504027
Board Certified: 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: WC
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: 100166663025
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 100436521010
Board Certified: 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
Hours: TH 8:30AM-6PM F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE

Provider ID: 100436521013

Board Certified: 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

Hours: TH 8:30AM-6PM F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

MUNDAE, RUSDEEP

Provider ID: 100444986019

Board Certified: 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: Male

NPI: 1811488687

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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 100421093012

Board Certified: 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

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 100421093019

Board Certified: 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

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 100421093024

Board Certified: 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

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 100421093022

Board Certified: No

IHP OF SOUTHERN CAL-PHP

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-2284

Fax: (619) 474-3919

After Hours Phone: (619) 474-2284

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PEDIATRIC DERMATOLOGY

BOHRER, NICHOLAS

Provider ID: 100465360005

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

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: Male

NPI: 1689134348

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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 100246129005

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619) 434-7308

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

D. Red de proveedores médicos especialistas

Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 100246129005
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 100348734003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Provider Gender: Female
License Number: PA55660
NPI: 1720524374
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 100348734003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Provider Gender: Female
License Number: PA55660
NPI: 1720524374
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 100060299006
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE
Provider ID: 100060299006
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
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: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536013
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536013
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.lamaestra.org

PODIATRIST

ATMAR, AKMAL
Provider ID: 100315099005
Board Certified: No
COMMUNITY CARE IPA LLC
2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Phone: (858) 275-6320
Fax: (877) 671-6835
After Hours Phone: (858) 275-6320
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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PODIATRIST

DAVIDSON III, JOHN
Provider ID: 100330956006
Board Certified: 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
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
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: 100330956040
Board Certified: 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
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 100423333008
Board Certified: 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
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: 100451454012

Board Certified: 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
Hours: M-TH 7AM-7PM F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 100378155008
Board Certified: 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
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: 100381855009
Board Certified: 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
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: 100418736007
Board Certified: 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
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL

D. Red de proveedores médicos especialistas

THERAPIST

NGUYEN, TIA
Provider ID: 100418736009
Board Certified: 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
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: 100356824010
Board Certified: 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
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: 100356824016
Board Certified: 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
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: 100361481014
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

THERAPIST

SPARKS, TODD

Provider ID: 100008189024
Board Certified: 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
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

TORRES, MICHAEL ANDREW

Provider ID: 100450939004
Board Certified: 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: 1770302218
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 100357282011
Board Certified: 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
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 100347956030
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
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: 100312612005
Board Certified: 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
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: 100334163008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 757-5841
After Hours Phone: (760) 757-5841
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
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
Hours: M-F 8AM-5PM
SA 8AM-4:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
Provider ID: 100334163007
Board Certified: 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
Hours: M-F 8AM-5PM
SA 8AM-4:30PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
Provider ID: 100334163008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 757-5841
After Hours Phone: (760) 757-5841
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
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
Hours: M-F 8AM-5PM
SA 8AM-4:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

CARROLL, MAYA
Provider ID: 100396575004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483

NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
Provider ID: 100413130019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Provider Language(s) Spoken: Igbo
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

D. Red de proveedores médicos especialistas

CHIRIBOGA, MEGAN
Provider ID: 100398353009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
Provider ID: 100421795022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
Provider ID: 100421795022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
Provider ID: 100421795022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
Provider ID: 100421795022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
Provider ID: 100421795022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
Provider ID: 100421795022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommu

nityclinic.org

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 100421795022

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 100274833025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95001650

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 100274833025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95001650

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 100274833025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95001650

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 100274833025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95001650

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 100274833025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95001650

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 100274833025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95001650

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 100418186028

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186028
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186028
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186028
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186028

Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
Provider ID: 100418186028
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY
Provider ID: 100412952002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1326052457
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommu

D. Red de proveedores médicos especialistas

nityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 100324621022

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95006826

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 100324621022

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95006826

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 100324621022

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95006826

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 100324621022

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95006826

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 100324621010

Board Certified: No

IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621010
Board Certified: No
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621022
Board Certified: No
IHP OF SOUTHERN CAL-PHP

D. Red de proveedores médicos especialistas

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
Provider ID: 100417497017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
Provider ID: 100417497017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
Provider ID: 100417497017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 100417497017

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 100417497017

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 100417497017

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 100417497017

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

D. Red de proveedores médicos especialistas

T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 100334276018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
Provider ID: 100397041030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
Provider ID: 100397041030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
Provider ID: 100397041030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
Provider ID: 100397041030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
Provider ID: 100397041030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
Provider ID: 100397041030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409028
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409025
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409026
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95003447
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: P, EB, IB, E, R, T, WC, ME
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100345409015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95003447
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: P, EB, IB, E, R, T, WC, ME
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

LANG, LESLIE
Provider ID: 100276698014
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NAVA, PETER
Provider ID: 100389708019
Board Certified: 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
License Number: NP95016584
NPI: 1689251571
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

NAVA, PETER
Provider ID: 100389708019
Board Certified: 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
License Number: NP95016584
NPI: 1689251571
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

NAVA, PETER

Provider ID: 100389708019

Board Certified: 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

License Number: NP95016584

NPI: 1689251571

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

NAVA, PETER

Provider ID: 100389708019

Board Certified: 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

License Number: NP95016584

NPI: 1689251571

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

NAVA, PETER

Provider ID: 100389708019

Board Certified: 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

License Number: NP95016584

NPI: 1689251571

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

NAVA, PETER

Provider ID: 100389708019

Board Certified: 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
License Number: NP95016584
NPI: 1689251571
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

NIBBELINK AHEARN, SANDRA
Provider ID: 100439342003
Board Certified: 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
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: 100439342006
Board Certified: 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
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: 100237811011
Board Certified: 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
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE

D. Red de proveedores médicos especialistas

PRACTITIONER

RAYTA, NICOLE

Provider ID: 100365303003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RICHARDS, KRISINDA

Provider ID: 100444621003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 100403948009
Board Certified: 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
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: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95007724
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: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 100331142003
Board Certified: 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
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

VAUGHAN, ROBERT
Provider ID: 100386669001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95012681
NPI: 1780233221
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

VAUGHAN, ROBERT

Provider ID: 100386669001

Board Certified: No

IHP OF SOUTHERN CAL-PHP

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: NP95012681

NPI: 1780233221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

WALKER, ALEXANDRA

Provider ID: 100430076003

Board Certified: No

IHP OF SOUTHERN CAL-PHP

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Female

License Number: NP95026439

NPI: 1578220612

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

WALKER, ALEXANDRA

Provider ID: 100430076003

Board Certified: No

IHP OF SOUTHERN CAL-PHP

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Female

License Number: NP95026439

NPI: 1578220612

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

WALKINS, BETHANY

Provider ID: 100457547008

Board Certified: 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: 1245545581

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 100421407033

Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95004109
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

WINDHAM, SUZONNE
Provider ID: 100421407033
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95004109
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

WINDHAM, SUZONNE
Provider ID: 100421407033
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95004109
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

WINDHAM, SUZONNE
Provider ID: 100421407033
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95004109
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM

D. Red de proveedores médicos especialistas

TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

WINDHAM, SUZONNE
Provider ID: 100421407033
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95004109
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

WINDHAM, SUZONNE
Provider ID: 100421407033
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95004109
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
Website: www.vistacommunityclinic.org

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE
Provider ID: 100342703006
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

PERLMAN, TAMARA
Provider ID: 100137490014
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

ANDREWS, BRAD
Provider ID: 100276036015
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

DERMATOLOGY

BROWN, REGINA
Provider ID: 100436783016
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 100420058015
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1811423072
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

REALYVASQUEZ, JOHN
Provider ID: 100463697018
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1700464237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN JOAQUIN GENERAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
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: 100350934013
Board Certified: 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
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMANCA, OMAR
Provider ID: 100333689013
Board Certified: 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
Hours: M-F 8AM-5PM SA 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
Provider ID: 100464747029
Board Certified: 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: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
Provider ID: 100464747027
Board Certified: No
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

D. Red de proveedores médicos especialistas

After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
Provider ID: 100464747024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SEAWELL, CHRISTINE
Provider ID: 100445156003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 100001887055
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

D. Red de proveedores médicos especialistas

MOUSSAVIAN, MEHRAN
Provider ID: 100009399076
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
Provider ID: 100009399076
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

NEPHROLOGY

LIU, ANDREW
Provider ID: 100413253004
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW
Provider ID: 100413253037
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW
Provider ID: 100413253039
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW
Provider ID: 100413253043
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEUROLOGY

PASSIAK, BRITTANY
Provider ID: 100441873012
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
Provider ID: 100149393015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 100042994028
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 100329999019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 100402237015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 100041362027
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 100007418031
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 100443808015
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

KIM, MICHAEL
Provider ID: 100350746015
Board Certified: 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
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: 100350746010
Board Certified: 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
Hours: SU 8AM-5PM M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 100293581018
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 100439457014
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 100136251023
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 100397112015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH

Provider ID: 100446632015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 100419888010
Board Certified: 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
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: 100156641018
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

D. Red de proveedores médicos especialistas

Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
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: 100435004011
Board Certified: 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 ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
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: 100365371009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1316162324
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA
Provider ID: 100417084009
Board Certified: 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): N
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD
Provider ID: 100077687030
Board Certified: 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): N
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PERTL, URSULA
Provider ID: 100072222031
Board Certified: 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: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL
Provider ID: 100410838012
Board Certified: 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
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: 100376522012
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH
Provider ID: 100338040019
Board Certified: 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
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: 100198556023
Board Certified: 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):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
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: 100110456022
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 100413678014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 100439492016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 100395245014

D. Red de proveedores médicos especialistas

Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1144615659
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

CARTWRIGHT, VICTORIA
Provider ID: 100464884005
Board Certified: 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: 1174591747
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

KINGDON, JOANNA
Provider ID: 100417084019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
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: 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\21
American Sign Language (ASL): N
Hours: M-F 8AM-5PM SA 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE
Provider ID: 100365228010
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

BLAKESPEAR, JEREMY
Provider ID: 100043481009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058
Phone: (760) 433-3155
After Hours Phone: (760) 433-3155
Provider Gender: Male
License Number: PA19825
NPI: 1750474177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

PHYSICIANS ASSISTANT

BLAKESPEAR, JEREMY
Provider ID: 100043481009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058
Phone: (760) 433-3155
After Hours Phone: (760) 433-3155
Provider Gender: Male
License Number: PA19825
NPI: 1750474177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

PHYSICIANS ASSISTANT

NORD, GABRIELLE
Provider ID: 100460880001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA61252
NPI: 1477125292
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

NORD, GABRIELLE
Provider ID: 100460880001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA61252
NPI: 1477125292
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

NORD, GABRIELLE
Provider ID: 100460880004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

D. Red de proveedores médicos especialistas

Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1477125292
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RAMOS, ELENA
Provider ID: 100407216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1306489570
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RANDALLS, JESSICA
Provider ID: 100333665003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA54982
NPI: 1538410550
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RANDALLS, JESSICA
Provider ID: 100333665003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA54982
NPI: 1538410550
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 100416448014
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PSYCHOLOGIST

JENSEN, BRIAN
Provider ID: 100223007004
Board Certified: 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

Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

KRAPES, MICHAEL
Provider ID: 100168537004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1215233028
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 100333991029
Board Certified: 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, HOAG HOSPITAL IRVINE, 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
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
Provider ID: 100330164030
Board Certified: 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, TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
Provider ID: 100405559027
Board Certified: 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, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN
Provider ID: 100332790037
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CIDAMBI, EMILY
Provider ID: 100351572012
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY
Provider ID: 100135959027
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 100043066028
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 100441948012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

POWAY

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412027
Board Certified: No
IHP OF SOUTHERN CAL-PHP
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742

After Hours Phone: (858) 218-3000
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

WOLFE, AMANDA
Provider ID: 100229508005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WRIGHT, KIMBERLY
Provider ID: 100340281004
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3200
Fax: (858) 673-1587
After Hours Phone: (858) 675-3200
Provider Gender: Female
NPI: 1811400708
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

DERMATOLOGY

POUSTI, BOBAK
Provider ID: 100441014008
Board Certified: 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
Hours: M-TH 8:30AM-4:30PM
F 8:30AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

D. Red de proveedores médicos especialistas

DERMATOLOGY

POUSTI, BOBAK

Provider ID: 100441014006

Board Certified: 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

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: 100280391005

Board Certified: 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

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 100202420016

Board Certified: 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

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERNAL MEDICINE

THAPER, MOHINDERPAL

Provider ID: 100106242018

Board Certified: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 575
POWAY, CA 92064

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760) 489-1458

Provider Gender: Male

NPI: 1295795037

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 100071303034
Board Certified: 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: P, EB, IB, E, R, WC
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: 100143665009
Board Certified: 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 INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 100397293008
Board Certified: 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 VALLEY HOSPITAL, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

HAMILTON, ROSS
Provider ID: 100435395031
Board Certified: 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: WC
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

OBSTETRICS / GYNECOLOGY

COBB, DAMON
Provider ID: 100141309011
Board Certified: 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: WC
Hours: M-TH 9AM-4:30PM F 9AM-1PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

LOZIER, JEFFREY
Provider ID: 100020221007
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

KIM, MICHELLE
Provider ID: 100031604008
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

BALDWIN, DONNA
Provider ID: 100332665004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Provider Gender: Female
License Number: PA23310
NPI: 1649692369
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-4:30PM
Website: N/A

PHYSICIANS ASSISTANT

BALDWIN, DONNA
Provider ID: 100332665004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Provider Gender: Female
License Number: PA23310
NPI: 1649692369
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-4:30PM
Website: N/A

PHYSICIANS ASSISTANT

TOTTON, GABRIELLE
Provider ID: 100458436003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858) 218-3000
Provider Gender: Female
NPI: 1407488240
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PODIATRIST

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

BRAZIER, SETH
Provider ID: 100298667014
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PODIATRIST

HAN, KYOUNG
Provider ID: 100276255023
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PODIATRIST

HAN, KYOUNG
Provider ID: 100276255018
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
15706 POMERADO RD STE 102
POWAY, CA 92064
Phone: (858) 485-1494
Fax: (858) 485-1515
After Hours Phone: (858) 485-1494
Provider Gender: Female
NPI: 1083954671
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese, Korean
Cultural Competency: N
Hospital Affiliation: SADDLEBACK MEMORIAL MED CTR, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PODIATRIST

READ, TRENTON
Provider ID: 100400838008
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

RHEUMATOLOGY

RAO, SOUMYA
Provider ID: 100112040037
Board Certified: 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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY GENERAL

GROVE, JAY
Provider ID: 100000131029
Board Certified: 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
Website: N/A
IPA: Community Care IPA LLC

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP
Provider ID: 100007475007
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100007475008
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

SURGERY ORTHOPEDIC

BRIED, JAMES
Provider ID: 100052888009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RAMONA

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH
Provider ID: 100017172009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH
Provider ID: 100017172009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
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: P, EB, IB, E, R
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

ECKENROTH, SAGE
Provider ID: 100460870001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95031140
NPI: 1982447884
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

ECKENROTH, SAGE
Provider ID: 100460870001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95031140
NPI: 1982447884
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

SALAS GAERLAN, JESSICA
Provider ID: 100351133003
Board Certified: 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: P, EB, IB, E
Website: N/A
IPA: Community Care IPA LLC

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

REIFENBERGER, JODY
Provider ID: 100185356004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22669
NPI: 1386741072
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

REIFENBERGER, JODY
Provider ID: 100185356004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22669
NPI: 1386741072
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Website: www.ihpsocal.org

SAN DIEGO

ADVANCED HEART FAILURE AND TRANSPLANT

D. Red de proveedores médicos especialistas

CARDIOLOGY

SILVA ENCISO, JORGE

Provider ID: 100168569019
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

SILVA ENCISO, JORGE

Provider ID: 100168569031
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

BALUCH, NARGES

Provider ID: 100441465003
Board Certified: 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, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

ALLERGY IMMUNOLOGY

JAMES, CHRISTINE

Provider ID: 100377435003
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

RIEDL, MARC
Provider ID: 100049362011
Board Certified: 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: WC
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

WANG, XINYU
Provider ID: 100446023010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

WANG, XINYU
Provider ID: 100446023009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

AL AZZAWI, SARAH
Provider ID: 100445216008
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1063041887
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

AL AZZAWI, SARAH
Provider ID: 100445216013
Board Certified: 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
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ALEXANDER, BRENTON
Provider ID: 100348665003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA
Provider ID: 100405155012
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265938724
Provider English Spoken: Y
Cultural Competency: N
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

ANESTHESIOLOGY

BHATIA, KARISHMA
Provider ID: 100445299013
Board Certified: 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

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BHATIA, KARISHMA
Provider ID: 100445299008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, ELSIE
Provider ID: 100445854014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, SPENCER
Provider ID: 100457271013
Board Certified: 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: 1124656020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, ELSIE
Provider ID: 100445854013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, SPENCER
Provider ID: 100457271015
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

926-8273
Provider Gender: Male
NPI: 1124656020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CABANISS, SCOTT
Provider ID: 100442286013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CABANISS, SCOTT
Provider ID: 100442286014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CANO, SARAH
Provider ID: 100333405004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750517306
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW
Provider ID: 100033366056
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW
Provider ID: 100033366051
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN
Provider ID: 100442302013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN
Provider ID: 100442302014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CURRAN, BRIAN
Provider ID: 100345258003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

DARWISH, ALEX
Provider ID: 100445321013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

DARWISH, ALEX
Provider ID: 100445321008
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FEJLEH, ASHLEY
Provider ID: 100360072003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

FUNDINGSLAND, BRENT
Provider ID: 100042704014
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GARRETT, RILEY
Provider ID: 100368456009
Board Certified: 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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GARRETT, RILEY
Provider ID: 100368456014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE
Provider ID: 100442389013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE
Provider ID: 100442389014
Board Certified: No
UCSD MEDICAL GROUP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

HUME, QUINN
Provider ID: 100356659038
Board Certified: No
IHP OF SOUTHERN CAL-PHP
9095 RIO SAN DIEGO DR
STE 100
SAN DIEGO, CA 92108
Phone: (619) 819-4524
Fax: (619) 342-9641
After Hours Phone: (619) 819-4524
Provider Gender: Male
NPI: 1003977158
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: REDLANDS COMMUNITY HOSP, SAN GORGONIO MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 100348070005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KAWASAKI, MEGAN
Provider ID: 100446016013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KAWASAKI, MEGAN
Provider ID: 100446016015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KIM, ELIZABETH
Provider ID: 100445296008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KIM, ELIZABETH
Provider ID: 100445296013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KROL, CAITLIN
Provider ID: 100445308013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KROL, CAITLIN
Provider ID: 100445308008
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

ANESTHESIOLOGY

MALONEY, IAN

Provider ID: 100445287013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MALONEY, IAN

Provider ID: 100445287008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEASER, JACQUELINE

Provider ID: 100445222008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEASER, JACQUELINE

Provider ID: 100445222013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 100346146003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720473044
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MILLAR, MELISSA
Provider ID: 100335426003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL
Provider ID: 100368666005
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL
Provider ID: 100368666009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

NGUYEN, QUOC-SY
Provider ID: 100348549003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

OSWALD, JESSICA
Provider ID: 100341848005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SHAH, SONALI
Provider ID: 100375377007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
9095 RIO SAN DIEGO DR STE 100
SAN DIEGO, CA 92108
Phone: (619) 853-8860
Fax: (619) 342-9641
After Hours Phone: (619) 853-8860
Provider Gender: Female
NPI: 1033504055
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

ANESTHESIOLOGY

SHAW, SUSANNA
Provider ID: 100354657003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

ANESTHESIOLOGY

SNOW, ERICA

Provider ID: 100445230010

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SNOW, ERICA

Provider ID: 100445230013

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 100349486003

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SREJIC, UNA

Provider ID: 100136001005

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 100079047048
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386856821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TRIVEDI, SURAJ
Provider ID: 100351793003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TSUDA, PAIGE
Provider ID: 100361419003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TU, MONIQUE
Provider ID: 100047884009
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, 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

ANESTHESIOLOGY

TULLY, JEFFREY
Provider ID: 100359980004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871912493
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TZENG, ERIC
Provider ID: 100377120004
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

YOUNAN, LAWRENCE
Provider ID: 100347401003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

ANESTHESIOLOGY

ZAERPOOR, DARA

Provider ID: 100445310010

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

ZAERPOOR, DARA

Provider ID: 100445310013

Board Certified: 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: 1497226450

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN

Provider ID: 100370717004

Board Certified: No

UCSD MEDICAL GROUP

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, EL CENTRO REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 100349686003

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 100347956032
Board Certified: 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
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: 100347956028
Board Certified: 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
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: 100454394015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

DEJULIO, PAUL
Provider ID: 100454394014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

PHILLIPS, COTI
Provider ID: 100397772005
Board Certified: 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: 1639600083
Provider English Spoken: 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

AUDIOLOGIST

ARHART, KESLEY
Provider ID: 100449940016
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DRFL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1750041687
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

EARLES, LYDIA
Provider ID: 100440915014
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1528897899
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

KIM, SHANNON
Provider ID: 100445366005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

AUDIOLOGIST

SERENO, EMILY

D. Red de proveedores médicos especialistas

Provider ID: 100430569016
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1023789591
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CARDIAC ELECTROPHYSIOLOGY

BIRGERSDOTTER-GREEN, ULRIKA
Provider ID: 100043206019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

BLUM, RICHARD
Provider ID: 100024376006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: G53758
NPI: 1043310030
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CARDIAC ELECTROPHYSIOLOGY

BLUM, RICHARD
Provider ID: 100024376006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: G53758
NPI: 1043310030
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CARDIAC

D. Red de proveedores médicos especialistas

ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 100332796044
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 100332796051
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 100332796014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 100332796012
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON
Provider ID: 100329623024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON
Provider ID: 100329623035
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

RAISSI SHABARI, FARSHAD
Provider ID: 100298422021
Board Certified: 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: EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

RAISSI SHABARI, FARSHAD
Provider ID: 100298422026

D. Red de proveedores médicos especialistas

Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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: EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH
Provider ID: 100321039018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH
Provider ID: 100321039030
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH
Provider ID: 100321039032
Board Certified: 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: 1346470408
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

BIRS, ANTOINETTE
Provider ID: 100445358008
Board Certified: 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: 1164957957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW
Provider ID: 100379223029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW
Provider ID: 100379223039
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW
Provider ID: 100379223041
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 100085150031
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 100085150037
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 100085150011
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST FL 3
SAN DIEGO, CA 92103
Phone: (858) 657-8530
Fax: (619) 543-2287
After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 100085150041
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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: 1013059286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 100085150012
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

COTTER, BRUNO
Provider ID: 100109741037
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

COTTER, BRUNO
Provider ID: 100109741027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

COTTER, BRUNO
Provider ID: 100109741033
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

DURAN, EDWARD
Provider ID: 100419412032
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
SAN DIEGO, CA 92101
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

GUPTA, TRIPTI
Provider ID: 100445976014
Board Certified: 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: 1306290242
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

JAIN, NIKHIL
Provider ID: 100471200005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
286 EUCLID AVE STE 204
SAN DIEGO, CA 92114
Phone: (619) 616-2100
Fax: (619) 768-6301
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1376049114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

JAIN, NIKHIL
Provider ID: 100471200003

D. Red de proveedores médicos especialistas

Board Certified: No
IHP OF SOUTHERN CAL-PHP
412 WASHINGTON ST
SAN DIEGO, CA 92103
Phone: (619) 916-2100
After Hours Phone: (619) 916-2100
Provider Gender: Male
NPI: 1376049114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

KEEN, WILLIAM
Provider ID: 100386939016
Board Certified: 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: 1962561571
Provider English Spoken: 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

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 100195767034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 100195767042
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 100195767009
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851561021
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 100220719027
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 100220719028
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 100220719043
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 100220719032
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS
Provider ID: 100344257007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PROHASKA, THOMAS
Provider ID: 100405507004
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS
Provider ID: 100440153006
Board Certified: 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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS
Provider ID: 100440153016
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS
Provider ID: 100440153020
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY
Provider ID: 100405575016
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY
Provider ID: 100405575010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

D. Red de proveedores médicos especialistas

SHAPIRO, HILARY
Provider ID: 100405575023
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEN, JIA
Provider ID: 100321047029
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEN, JIA
Provider ID: 100321047036
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEN, JIA
Provider ID: 100321047026
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI
Provider ID: 100109936057
Board Certified: 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): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI
Provider ID: 100109936043
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

SILVA ENCISO, JORGE
Provider ID: 100168569024
Board Certified: 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: 1639404031

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 100329940026
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 100329940023
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 100329940036
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

APPENZELLER, ERICA
Provider ID: 100107727006
Board Certified: No

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724065
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

D. Red de proveedores médicos especialistas

ARELLANO, JACQUELINE
Provider ID: 100367724064
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 100367724010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 100441975027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 100441975024
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100081201013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 100445075005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 100445075008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 100445075014
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN
Provider ID: 100003674012
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
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: 100442928002
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-6PM SA 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA
Provider ID: 100423437003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 100358973007
Board Certified: 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
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: 100389448005
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

AMOS, MARIA
Provider ID: 100389495005
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235891953
Provider English Spoken: Y
Cultural Competency: N
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

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 100333694021
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
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
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 100333694020
Board Certified: No
OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
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
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 100333694021
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
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
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 100333694020
Board Certified: No
OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
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
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

ARENAS, CECILY
Provider ID: 100193312020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ARENAS, CECILY
Provider ID: 100193312025
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ARTS, SERENA
Provider ID: 100202427003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE

D. Red de proveedores médicos especialistas

SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: NP10769
NPI: 1801881552
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Website: N/A

CERTIFIED NURSE PRACTITIONER

ARTS, SERENA
Provider ID: 100202427003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: NP10769
NPI: 1801881552
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Website: N/A

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA
Provider ID: 100434342005
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95024510
NPI: 1558058636
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA
Provider ID: 100434342005
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95024510
NPI: 1558058636
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

BAKER, TANYA
Provider ID: 100354835003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
Provider ID: 100344817001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
Provider ID: 100344817001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

BENARD, ROBERT
Provider ID: 100359189003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BILOTTA, NATALIE
Provider ID: 100386845005
Board Certified: No

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144809393
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RIVERSIDE COMMUNITY HOSP, 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

CERTIFIED NURSE PRACTITIONER

BRYDEN, ALLISON
Provider ID: 100419446004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95015040
NPI: 1902416332
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

BRYDEN, ALLISON
Provider ID: 100419446004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95015040
NPI: 1902416332
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA
Provider ID: 100349784006
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851749253
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

BUI, ANH

Provider ID: 100418003007

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Provider Gender: Male

License Number: NP95025682

NPI: 1184309684

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

BUI, ANH

Provider ID: 100418003007

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Provider Gender: Male

License Number: NP95025682

NPI: 1184309684

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

BUI, ANH

Provider ID: 100418003006

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BUI, ANH

Provider ID: 100418003005

Board Certified: 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

Hours: M-F 8AM-5PM

D. Red de proveedores médicos especialistas

Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BURNS, DELLA
Provider ID: 100334189003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Female
License Number: NP7413
NPI: 1871577023
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

BURNS, DELLA
Provider ID: 100334189003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Female
License Number: NP7413
NPI: 1871577023
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER
Provider ID: 100345048008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CELESTIN-RAMSEY, AKANKE
Provider ID: 100381069004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP8563
NPI: 1447450275
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N

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

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

Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 100381069004

Board Certified: No

IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: NP8563

NPI: 1447450275

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

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

Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

CHACO, MEGHAN

Provider ID: 100463911001

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Provider Gender: Female

License Number: NP95030516

NPI: 1497580666

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

CHACO, MEGHAN

Provider ID: 100463911001

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Provider Gender: Female

License Number: NP95030516

NPI: 1497580666

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

CHASE, AVA

Provider ID: 100334482002

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95000602
NPI: 1164496386
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

CHASE, AVA
Provider ID: 100334482002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95000602
NPI: 1164496386
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

CHAVEZ, ALEXANDRIA
Provider ID: 100349546003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHEATHAM, BRITTANY
Provider ID: 100389527005
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE
Provider ID: 100224321010

D. Red de proveedores médicos especialistas

Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE
Provider ID: 100224321008
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHUNG, SUEMIN
Provider ID: 100437096018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 100454805022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CIAFONE, JOANNA
Provider ID: 100454805024
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 100454805023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 100454805025
Board Certified: 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: 1194551861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 100454805021
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COHEN, MARGO
Provider ID: 100463821001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95012765
NPI: 1003463811

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

COHEN, MARGO
Provider ID: 100463821001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95012765
NPI: 1003463811
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA
Provider ID: 100334942027
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE
Provider ID: 100152567019
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE
Provider ID: 100152567022
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609081710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CORREA, ANN MARIE
Provider ID: 100452657003
Board Certified: 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: 1083420814
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

COSINO, ANJELICA THERESE
Provider ID: 100332621003
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 100449864030
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 100449864029

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 100449864031
Board Certified: 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: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 100449864027
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 100449864028
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 100449864003
Board Certified: 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
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: 100449864005
Board Certified: 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
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER
Provider ID: 100339971011
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1679850671
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 100390636007
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528632742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DECOOL, TAYLOR
Provider ID: 100450508003
Board Certified: No

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN
Provider ID: 100413929007
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN
Provider ID: 100413929009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEMESSIE, RAHEL
Provider ID: 100433746012
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95027483
NPI: 1619749041
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

DEMESSIE, RAHEL
Provider ID: 100433746012
Board Certified: No
OPERATION SAMAHAN

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95027483
NPI: 1619749041
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

DEUTSCH, KAREN
Provider ID: 100352764006
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740517127
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEUTSCH, KAREN
Provider ID: 100352764003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
Provider ID: 100353724002
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
Provider ID: 100353724002
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N

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

Hours: M-F 8AM-6PM SA 8AM-2PM

Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA

Provider ID: 100353724002

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Hours: M-F 8AM-6PM SA 8AM-2PM

Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

DOAN, ANGELA

Provider ID: 100348530014

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DOAN, ANGELA

Provider ID: 100348530015

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE ANNE

Provider ID: 100235115008

Board Certified: No

UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396085098

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN
Provider ID: 100283303003
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100401288004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

ECLARINO, GALELEO
Provider ID: 100401288002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

EDNACOT, KARYNNE
Provider ID: 100432696006
Board Certified: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 100
SAN DIEGO, CA 92123
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
NPI: 1548027964
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
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: 100432696005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
8010 FROST ST STE 100
SAN DIEGO, CA 92123
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
NPI: 1548027964
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
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: 100368896003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA
Provider ID: 100368896007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

FELD, KEREN
Provider ID: 100403773002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE

D. Red de proveedores médicos especialistas

SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Female
NPI: 1730835083
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FERMIL MITCHELL, YVONNE
Provider ID: 100198057005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FISHER, SLOANE
Provider ID: 100412031007
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

GALLEGOS, CYNTHIA
Provider ID: 100434615001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95016217
NPI: 1174105589
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GALLEGOS, CYNTHIA

D. Red de proveedores médicos especialistas

Provider ID: 100434615001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95016217
NPI: 1174105589
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
Provider ID: 100364051001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
Provider ID: 100364051001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GOLDFINGER, SARAH
Provider ID: 100342584003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GOLDFINGER, SARAH
Provider ID: 100342584003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009048
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009047
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 100334009049
Board Certified: No
UCSD MEDICAL GROUP
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

D. Red de proveedores médicos especialistas

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

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA
Provider ID: 100440155003
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP23206
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA
Provider ID: 100440155003
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP23206
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA
Provider ID: 100440155002
Board Certified: 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
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820007
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820010
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95010517
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: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female

D. Red de proveedores médicos especialistas

License Number: NP95010517
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95010517
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95010517
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 100341820003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95010517
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HARKNESS, RUMIKO
Provider ID: 100102986009
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL
Provider ID: 100418071006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95025954
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL
Provider ID: 100418071006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95025954
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL
Provider ID: 100418071007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95025954
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL
Provider ID: 100418071007
Board Certified: No
IHP OF SOUTHERN CAL-PHP

D. Red de proveedores médicos especialistas

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95025954
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL
Provider ID: 100418071006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95025954
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL
Provider ID: 100418071006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95025954
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE
Provider ID: 100334837002
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: NP17008
NPI: 1659579134
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE
Provider ID: 100334837002

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: NP17008
NPI: 1659579134
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

HART, BECKY
Provider ID: 100425598003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Provider Gender: Female
License Number: NP95025699
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: EB, IB, E
Website: N/A

CERTIFIED NURSE PRACTITIONER

HART, BECKY
Provider ID: 100425598003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Provider Gender: Female
License Number: NP95025699
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: EB, IB, E
Website: N/A

CERTIFIED NURSE PRACTITIONER

HART, BECKY
Provider ID: 100425598002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 100334276011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

HEFNER, ANNA
Provider ID: 100434865004
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP5512
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

HEFNER, ANNA
Provider ID: 100434865004
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP5512
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

HEFNER, ANNA
Provider ID: 100434865003
Board Certified: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 434-1613
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1588913537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-6PM

D. Red de proveedores médicos especialistas

Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN
Provider ID: 100406862004
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95020046
NPI: 1710632435
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN
Provider ID: 100406862004
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95020046
NPI: 1710632435
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA
Provider ID: 100376099002
Board Certified: 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: WC
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

HOANG, CHI
Provider ID: 100333142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
Provider ID: 100333142007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
Provider ID: 100333142007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
Provider ID: 100333142005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
Provider ID: 100333142007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
Provider ID: 100333142007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

HOERRES, LYNN
Provider ID: 100449858006
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
Provider ID: 100334478006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
Provider ID: 100334478006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female

D. Red de proveedores médicos especialistas

License Number: NP17852
NPI: 1205019510
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Thai*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*
- *Website: www.fhcsd.org*

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
Provider ID: 100334478014
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1809 NATIONAL AVE SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*

Provider Gender: Female
License Number: NP17852
NPI: 1205019510
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Thai*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: P, EB, IB, E, WC, ME*
- *Hours: M-F 8AM-5:30PM SA 8AM-5PM*
- *Website: www.fhcsd.org*

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
Provider ID: 100334478014
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1809 NATIONAL AVE SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*

Provider Gender: Female
License Number: NP17852
NPI: 1205019510
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Thai*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: P, EB, IB, E, WC, ME*
- *Hours: M-F 8AM-5:30PM SA 8AM-5PM*
- *Website: www.fhcsd.org*

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
Provider ID: 100334478006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 3544 30TH ST SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*

Provider Gender: Female
License Number: NP17852
NPI: 1205019510
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Thai*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: P, EB, IB, E, R, T, WC, ME*
- *Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*
- *Website: www.fhcsd.org*

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 100334478006

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 100324677016

Board Certified: 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

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 100324677017

Board Certified: 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: P, EB, IB, E, R, T

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

IBARRA, MARTHA
Provider ID: 100324677020
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 100324677020
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA
Provider ID: 100333895003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA
Provider ID: 100333895003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA
Provider ID: 100365110004
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

KEMP, KATHRINE
Provider ID: 100411576001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: NP95018497
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: EB, IB, E
Hours: M-F 8AM-5:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

KEMP, KATHRINE
Provider ID: 100411576001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: NP95018497
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: EB, IB, E
Hours: M-F 8AM-5:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

KHAN, MATTHEW
Provider ID: 100342182014
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426

D. Red de proveedores médicos especialistas

Provider Gender: Male
License Number: NP17838
NPI: 1942456124
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

KHAN, MATTHEW
Provider ID: 100342182014
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Provider Gender: Male
License Number: NP17838
NPI: 1942456124
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

KI, TRISH
Provider ID: 100333962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

KI, TRISH
Provider ID: 100333962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

KIDANE, ZINNIA
Provider ID: 100417898003

D. Red de proveedores médicos especialistas

Board Certified: 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: 1780334110
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KIDANE, ZINNIA
Provider ID: 100417898004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KIM, YUNMI
Provider ID: 100446291003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

LAFORTEZA, JOZELLE
Provider ID: 100337620003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 100454499024
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
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: 1265019020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 100454499023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 100454499025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 100454499021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 100454499022
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519017
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3444 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
Phone: (858) 429-7646
Fax: (858) 429-7929
After Hours Phone: (858) 429-7646
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 100070519019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A

D. Red de proveedores médicos especialistas

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

Provider ID: 100430348001

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2355

After Hours Phone: (619) 515-2355

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

Provider ID: 100430348001

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2355

After Hours Phone: (619) 515-2355

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 100334142001

Board Certified: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Provider Gender: Female

License Number: NP95000203

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 100334142001

Board Certified: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Provider Gender: Female

License Number: NP95000203

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: P, EB, IB, E, R, T, WC, ME

D. Red de proveedores médicos especialistas

Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

LUNA, ABIGAIL
Provider ID: 100454852003
Board Certified: 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
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

MARTIN, RIA
Provider ID: 100316474002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA
Provider ID: 100316474002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

MEDINA, RUBELETA
Provider ID: 100400885003
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETEL MARIE
Provider ID: 100411120005
Board Certified: 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
Hours: M-TH 8AM-6PM F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673043
Board Certified: 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 CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673042
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 100214673044
Board Certified: No
UCSD MEDICAL GROUP
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

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, 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

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE
Provider ID: 100415584008
Board Certified: 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
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: 100415584007
Board Certified: 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
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: 100354969003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA
Provider ID: 100337705003
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952627176
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NEJATI, FRESHTA
Provider ID: 100320201010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA
Provider ID: 100387998018
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95020179
NPI: 1417699869
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA
Provider ID: 100387998018
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95020179
NPI: 1417699869
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

NOCEDA, ANA
Provider ID: 100144861013
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA
Provider ID: 100144861012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA
Provider ID: 100144861012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA
Provider ID: 100144861013
Board Certified: No
IHP OF SOUTHERN CAL-PHP

D. Red de proveedores médicos especialistas

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 100450750008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 100450750020
Board Certified: 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
NPI: 1316619430
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 100450750012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 100450750016
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

OCONNELL, STEFANY
Provider ID: 100401596004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OPARA, CHINYERE
Provider ID: 100387177008
Board Certified: 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: 1083221683
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
Provider ID: 100332118008
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
Provider ID: 100332118003
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426

D. Red de proveedores médicos especialistas

After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
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
Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
Provider ID: 100332118008
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
Provider ID: 100332118003
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
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
Website: www.operationsamahan.org

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 100450780009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 100450780013
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 100450780016
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 100450780019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE
Provider ID: 100408922001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8AM-5:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE
Provider ID: 100408922001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hours: M-F 8AM-5:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

PAI, SARAH
Provider ID: 100199382008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAPPALARDO, ASHLEY
Provider ID: 100408889008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
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: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700

D. Red de proveedores médicos especialistas

After Hours Phone: (858) 810-8700
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
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: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 100368993008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE
Provider ID: 100383230004
Board Certified: 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: 1215543426
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

D. Red de proveedores médicos especialistas

PRACTITIONER

QUINTO, CINDY

Provider ID: 100334808002

Board Certified: 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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

Accessibility: P, EB, IB, E, WC

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY

Provider ID: 100334808006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY

Provider ID: 100334808002

Board Certified: 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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

Accessibility: P, EB, IB, E, WC

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

Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY

Provider ID: 100334808006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

RAJAEI, NILOUFAR
Provider ID: 100389486005
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1275904047
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
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

CERTIFIED NURSE PRACTITIONER

RAJIV, RENUKA
Provider ID: 100454952003
Board Certified: 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: 1821819301
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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

RALEIGH, DEBORAH
Provider ID: 100268195030
Board Certified: 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
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

REID, EMILY
Provider ID: 100334050004
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

REID, EMILY
Provider ID: 100334050004
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

RIEGO, SUZANNE
Provider ID: 100342614004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RILEY, JEREN
Provider ID: 100390228004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE
Provider ID: 100389575008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1225782022
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE
Provider ID: 100389575009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95019971
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: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE
Provider ID: 100389575009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95019971
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: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 100367518008
Board Certified: 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: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 100367518008
Board Certified: 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: P, EB, IB, E, R, T, WC
Website: www.sdfamilycare.org

N
Accessibility: P, EB, E, R
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 100367518021
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 100367518016
Board Certified: 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
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROZO, JOSE
Provider ID: 100405624006
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP4668

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: P, EB, IB, E, R, T, WC*
- *Hours: M 8:30AM-5:30PM*
  TU 8:30AM-9PM
  W-F 8:30AM-5:30PM
  SA 9AM-4PM
- *Website: www.sdfamilycare.org*

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*

Provider Gender: Female
License Number: NP4668
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5:30PM*
- *Website: www.sdfamilycare.org*

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*

Provider Gender: Female
License Number: NP4668
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5:30PM*
- *Website: www.sdfamilycare.org*

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765006
Board Certified: 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
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765009
Board Certified: No

D. Red de proveedores médicos especialistas

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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP4668
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: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP4668
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 100333765001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP4668
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: P, EB, IB, E, R,

T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL
Provider ID: 100390999020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL
Provider ID: 100390999027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL
Provider ID: 100403948007
Board Certified: 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
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL
Provider ID: 100403948004
Board Certified: 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

D. Red de proveedores médicos especialistas

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female

License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846006
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 100333846009
Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618006
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618009
Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare

.org

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 100334618001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH
Provider ID: 100334692002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: NP7374
NPI: 1730567678
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH
Provider ID: 100334692002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: NP7374
NPI: 1730567678
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

SAWIRES YAGER, AMANDA
Provider ID: 100463881001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95009999
NPI: 1083198147
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC

D. Red de proveedores médicos especialistas

Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SAWIRES YAGER, AMANDA
Provider ID: 100463881001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Provider Gender: Female
License Number: NP95009999
NPI: 1083198147
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SCHUH, ALTAIRA
Provider ID: 100261839010
Board Certified: 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
License Number: NP14995
NPI: 1609980788
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\22
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SCHUH, ALTAIRA
Provider ID: 100261839010
Board Certified: 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
License Number: NP14995
NPI: 1609980788
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\22
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: www.sdfamilycare.org

CERTIFIED NURSE PRACTITIONER

SEARS-WILEY, ELIZABETH
Provider ID: 100362843006

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE
Provider ID: 100314257004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE
Provider ID: 100314257007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE
Provider ID: 100314257019
Board Certified: 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: 1417194358
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA

D. Red de proveedores médicos especialistas

JOLLA JOHN SALLY THORNTON, 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

CERTIFIED NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 100334288010
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932522778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 100334288007
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 100334288029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SWANSON, BRIANNA
Provider ID: 100450171003
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

563-0250
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
Hours: M-F 8AM-5PM
SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SWANSON, BRIANNA
Provider ID: 100450171005
Board Certified: 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
Hours: M-F 8AM-5PM
SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SWARTZ, ERIN
Provider ID: 100348129006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TAING, JENNIFER
Provider ID: 100315387005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TALBOT, ADRIANNE
Provider ID: 100368030003
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

926-8273
Provider Gender: Female
NPI: 1992048557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

THOMPSON, COURTNEY
Provider ID: 100254894012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 100333696007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
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: WC
Website: N/A

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 100333696007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
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: WC
Website: N/A

CERTIFIED NURSE PRACTITIONER

TONG, KIM
Provider ID: 100417849016
Board Certified: No
UCSD MEDICAL GROUP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TONG, KIM
Provider ID: 100417849018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY
Provider ID: 100354632005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY
Provider ID: 100354632005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

D. Red de proveedores médicos especialistas

TREJO, ANA
Provider ID: 100365613027
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1033717194
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA
Provider ID: 100433083018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA
Provider ID: 100433083016
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA
Provider ID: 100183898003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP2286
NPI: 1598989261
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA
Provider ID: 100183898003

D. Red de proveedores médicos especialistas

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP2286
NPI: 1598989261
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

VIBAL-POASTER, MARIA KHRISTINA
Provider ID: 100338412003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA
Provider ID: 100396120007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95015780
NPI: 1184224396
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA
Provider ID: 100396120007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NP95015780
NPI: 1184224396
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WALDRUP, LA RHONDA
Provider ID: 100406799008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 966-7483
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1831627181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WALKINS, BETHANY
Provider ID: 100457547018
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (858) 292-1144
Fax: (858) 268-5145
After Hours Phone: (858) 292-1144
Provider Gender: Female
NPI: 1245545581
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WALKINS, BETHANY
Provider ID: 100457547009
Board Certified: 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: 1245545581
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA
Provider ID: 100342580003
Board Certified: 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
Provider Gender: Female
License Number: NP95010814

D. Red de proveedores médicos especialistas

NPI: 1841758984
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA
Provider ID: 100342580003
Board Certified: 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
Provider Gender: Female
License Number: NP95010814
NPI: 1841758984
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 100450187003
Board Certified: 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): N
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: 100450187005
Board Certified: 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
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: 100450187031
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1942037510
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 100450187030
Board Certified: 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: 1942037510
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 100450187027
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 100450187028
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 100450187029
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WIETZKE, MATTHEW
Provider ID: 100421574015
Board Certified: 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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
Provider ID: 100334173002
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
Provider ID: 100334173002
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM
Website: www.lamaestra.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WOO, ANDY BON
Provider ID: 100405529006

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WOO, ANDY BON
Provider ID: 100405529010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WOOLSEY, EMILY
Provider ID: 100458657005
Board Certified: 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: 1861147340
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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 REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN
Provider ID: 100355513003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED REGISTERED NURSE ANESTHETIST

APPLEGET, JOSEPH
Provider ID: 100346141003
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA
Provider ID: 100444851008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA
Provider ID: 100444851010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BOEING, KRISTINA
Provider ID: 100363979003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL
Provider ID: 100454377014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL
Provider ID: 100454377015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CONRAD, SIMON
Provider ID: 100450489018
Board Certified: No
UCSD MEDICAL GROUP
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
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CONRAD, SIMON
Provider ID: 100450489017
Board Certified: 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
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DAVENPORT, LARIS
Provider ID: 100454810014

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DAVENPORT, LARIS
Provider ID: 100454810015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 100454339013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 100454339014
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN
Provider ID: 100316930016
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982059044
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KERN MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 100442505014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 100442505013
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN
Provider ID: 100343590003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1427419944
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA
Provider ID: 100355015013
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL
Provider ID: 100454594015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL
Provider ID: 100454594014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LANDON
Provider ID: 100454767014
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LANDON
Provider ID: 100454767015
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

CERTIFIED REGISTERED NURSE ANESTHETIST

KEHOE, KATRINA
Provider ID: 100330244009
Board Certified: 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: 1942541768
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON
Provider ID: 100442366014
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON
Provider ID: 100442366013
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE
Provider ID: 100389451010
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RHYNER, GINA
Provider ID: 100278501011
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT
Provider ID: 100367777004
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SAURE, MELISSA
Provider ID: 100314580007
Board Certified: No
UCSD MEDICAL GROUP
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: 1497085104
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SCOTT, TIFFANY
Provider ID: 100445137008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SCOTT, TIFFANY
Provider ID: 100445137010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SERRA, NATALIE
Provider ID: 100198619017
Board Certified: 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: 1780015289
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TOCCO, JESSICA
Provider ID: 100444990010
Board Certified: 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: 1366836397
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TOCCO, JESSICA
Provider ID: 100444990008
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN
Provider ID: 100454439013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN
Provider ID: 100454439014
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

VINCENT, BERLIN
Provider ID: 100389513005
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1144987801
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL
Provider ID: 100445261010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL
Provider ID: 100445261013
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
Provider ID: 100335310003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

D. Red de proveedores médicos especialistas

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NM792
NPI: 1174553259
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
Provider ID: 100335310003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: NM792
NPI: 1174553259
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 100394547015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 100394547019
Board Certified: No
UCSD MEDICAL GROUP
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

EKHOLM, JANNA
Provider ID: 100136081018
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSHTEIN, YANA
Provider ID: 100336425002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Female
License Number: NM1662
NPI: 1396956512
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSHTEIN, YANA
Provider ID: 100336425002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Female
License Number: NM1662
NPI: 1396956512
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 100188278013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 100188278014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA
Provider ID: 100133296009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA
Provider ID: 100133296008
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE
Provider ID: 100173743009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 100172955018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 100172955015
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (619) 543-7878
After Hours Phone: (619) 543-7878
Provider Gender: Female
NPI: 1891752069
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 100172955014
Board Certified: 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: WC
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY
Provider ID: 100411357011
Board Certified: No

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY
Provider ID: 100411357015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

TOLMIE, SIMONE
Provider ID: 100399513004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CERTIFIED REGISTERED NURSE MIDWIFE

TOLMIE, SIMONE
Provider ID: 100399513004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

D. Red de proveedores médicos especialistas

ASSADIAN, MEHRAK
Provider ID: 100334604003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: DC27523
NPI: 1295278281
Provider English Spoken: Y
Provider Language(s) Spoken: Turkish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

CHIROPRACTOR

ASSADIAN, MEHRAK
Provider ID: 100334604003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: DC27523
NPI: 1295278281
Provider English Spoken: Y
Provider Language(s) Spoken: Turkish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.syhealth.org

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 100112203009
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 100112203009
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 100112203010
Board Certified: No
OPERATION SAMAHAN

D. Red de proveedores médicos especialistas

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 100112203010
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

CHIROPRACTOR

CHAMAPAGNE, ALLISON
Provider ID: 100441539003
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

HALEY, STEVEN
Provider ID: 100042365011
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

CHIROPRACTOR

HALEY, STEVEN
Provider ID: 100042365011
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335008
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Provider Gender: Male
License Number: DC29314
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 100007335008
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Provider Gender: Male
License Number: DC29314
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

CHIROPRACTOR

KAZEM, AHMAD
Provider ID: 100241576006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC33300
NPI: 1003296096
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, IB, E, T, WC
Website: www.syhealth.org

CHIROPRACTOR

KAZEM, AHMAD
Provider ID: 100241576006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC33300
NPI: 1003296096
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, IB, E, T, WC
Website: www.syhealth.org

CHIROPRACTOR

LOVERN, JENNIFER
Provider ID: 100035169007
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

CHIROPRACTOR

LOVERN, JENNIFER
Provider ID: 100035169007
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

CHIROPRACTOR

LUU, DANIEL
Provider ID: 100113874008
Board Certified: 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: WC
Hours: M 10AM-6PM TU 10AM-2PM W 10AM-6PM TH 10AM-2PM F 10AM-6PM
Website: N/A
IPA: Community Care IPA LLC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CHIROPRACTOR

MONTANE, RUBEN

Provider ID: 100438121003

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 100098557003

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

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

Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

Website: www.fhcsd.org

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 100098557003

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

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

Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

Website: www.fhcsd.org

CHIROPRACTOR

ROJAS, RICHARD

Provider ID: 100089490004

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Provider Gender: Male

License Number: DC31024

NPI: 1538318811

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

ROJAS, RICHARD
Provider ID: 100089490004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

SOSA, DAVID
Provider ID: 100267733005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

D. Red de proveedores médicos especialistas

CHIROPRACTOR

SOSA, DAVID

Provider ID: 100267733005

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

CHIROPRACTOR

TAGHIZADEH, MAJID

Provider ID: 100107830008

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Provider Gender: Male

License Number: DC30121

NPI: 1750590600

Provider English Spoken: Y

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.fhcsd.org

CHIROPRACTOR

TAGHIZADEH, MAJID

Provider ID: 100107830010

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Provider Gender: Male

License Number: DC30121

NPI: 1750590600

Provider English Spoken: Y

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

CHIROPRACTOR

TAGHIZADEH, MAJID

Provider ID: 100107830008

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Provider Gender: Male

License Number: DC30121

NPI: 1750590600

Provider English Spoken: Y

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

CHIROPRACTOR

TAGHIZADEH, MAJID
Provider ID: 100107830010
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CHIROPRACTOR

TRUONG, VENNES
Provider ID: 100415582001
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

CHIROPRACTOR

TRUONG, VENNES
Provider ID: 100415582001
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

DERMATOLOGY

BURROWS, WILLIAM
Provider ID: 100007079011
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

D. Red de proveedores médicos especialistas

MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

DERMATOLOGY

BURROWS, WILLIAM
Provider ID: 100007079011
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

DERMATOLOGY

CALAME, ANTOANELLA
Provider ID: 100107605017
Board Certified: 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 CHULA VISTA, YUMA REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

DERMATOLOGY

CARTER, NATASHA
Provider ID: 100335124006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

DERMATOLOGY

CARTER, NATASHA

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100335124006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

DERMATOLOGY

DANG, TIMOTHY
Provider ID: 100438321003
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KANNAN, SWATI
Provider ID: 100317422045
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KAUNITZ, GENEVIEVE
Provider ID: 100377560004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KIM, GRACE
Provider ID: 100445942005
Board Certified: 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: 1487114047
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KOLAR, MATTHEW
Provider ID: 100444557004
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (858) 657-8322
Fax: (888) 539-8781
After Hours Phone: (858) 657-8322
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
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

LIOU, YUJIE
Provider ID: 100434701003
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750944450
Provider English Spoken: Y
Cultural Competency: N
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

DERMATOLOGY

MALONEY, NOLAN
Provider ID: 100442290005
Board Certified: 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
Website: N/A

IPA: UCSD Medical Group

DERMATOLOGY

SHI, VERONICA
Provider ID: 100361439003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

SHI, VERONICA
Provider ID: 100361439007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

STERN, MARLEIGH
Provider ID: 100431847003
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710447883
Provider English Spoken: Y
Cultural Competency: N
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

DERMATOLOGY

SUTHERLAND, ANNA
Provider ID: 100442291005
Board Certified: 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

Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

WONG, HENRY
Provider ID: 100446111010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

ZUBAIR, RAHEEL
Provider ID: 100417959014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

EMERGENCY MEDICINE

AMANN, CHRISTOPHER
Provider ID: 100361003003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1134326895
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL, PIH HEALTH GOOD SAMARITAN HOSPITAL, PIH HEALTH WHITTIER HOSPITAL, PIH HEALTH WHITTIER HOSPITAL, PIH Hospital - Downey
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

AUSTIN, ANDREA
Provider ID: 100324799011
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: SU 12AM-11:59PM M-F 8AM-5PM SA 12AM-11:59PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
Provider ID: 100361136012
Board Certified: No
UCSD MEDICAL GROUP
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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
Provider ID: 100361136008
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
Provider ID: 100361136005
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 100360613005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 100360613008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 100360613012
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N

Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 100389300023
Board Certified: No
UCSD MEDICAL GROUP
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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 100389300008
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 100379966044
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

D. Red de proveedores médicos especialistas

CHEN, ALICE
Provider ID: 100379966016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 100379966014
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427476597
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHIN, BRIAN
Provider ID: 100398618011
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COOK, LEANNE
Provider ID: 100446062014
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN
Provider ID: 100247975038
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN
Provider ID: 100247975037
Board Certified: 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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COYNE, CHRISTOPHER
Provider ID: 100213836036
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

DHILLON, NAVNEET
Provider ID: 100445894006
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

DOROS, JOSHUA
Provider ID: 100331155006
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

EAGLE, SONJA
Provider ID: 100442336009
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HERSHFIELD, SOLOMIYA
Provider ID: 100438215011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HERSHFIELD, SOLOMIYA
Provider ID: 100438215009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNA
Provider ID: 100377749019
Board Certified: No
UCSD MEDICAL GROUP
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: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 100340900005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HRYNIEWICKI, ADAM
Provider ID: 100435209007
Board Certified: 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: EL CENTRO REGIONAL MEDICAL CENTER, 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

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 100355512011
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAFREE, ANDREW
Provider ID: 100248599038
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAFREE, ANDREW
Provider ID: 100248599032
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 100247892039
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 100247892040
Board Certified: No
UCSD MEDICAL GROUP
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

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 100355575038
Board Certified: No
UCSD MEDICAL GROUP
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 JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 100355575048
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 100355575012
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIPPI, MATTHEW
Provider ID: 100442335009
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH
Provider ID: 100105611052
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH
Provider ID: 100105611049
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MASON, MATTHEW
Provider ID: 100446823002
Board Certified: 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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL

CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MEDAK, ANTHONY
Provider ID: 100082496047
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MERTE, BRYAN
Provider ID: 100446033006
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN
Provider ID: 100346322008
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 605-4441
After Hours Phone: (858) 605-4441
Provider Gender: Female
NPI: 1871732214
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 8AM-10PM
M-F 8AM-5PM
SA 8AM-10PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN
Provider ID: 100346322007
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6400
After Hours Phone: (619) 543-6400

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY
Provider ID: 100377269012
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 100420058014
Board Certified: 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
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 100420058019
Board Certified: 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
Hours: SU-SA

D. Red de proveedores médicos especialistas

12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

REALYVASQUEZ, JOHN
Provider ID: 100463697016
Board Certified: 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: 1700464237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN JOAQUIN GENERAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

REALYVASQUEZ, JOHN
Provider ID: 100463697017
Board Certified: 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: 1700464237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN JOAQUIN GENERAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

ROURKE, KYLE
Provider ID: 100445833006
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

RUDOLF, FRANCES
Provider ID: 100342793005
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 12AM-11:59PM M-F 8AM-5PM SA 12AM-11:59PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SABHA, MAHMOUD
Provider ID: 100346850007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SADLER, CHARLOTTE
Provider ID: 100223653038
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SAMHA, LEEN
Provider ID: 100445240010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SANDIFORD, PATRICK
Provider ID: 100444860008
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider Gender: Male
NPI: 1700151917
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 100067332056
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 100067332055
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SEGAL, LAUREN
Provider ID: 100446819008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELF, MICHAEL
Provider ID: 100375157032
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, 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

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 100374703025
Board Certified: No
UCSD MEDICAL GROUP
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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SHISHLOV, KIRILL
Provider ID: 100285480029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SHISHLOV, KIRILL
Provider ID: 100285480023
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SLOANE, CHRISTIAN
Provider ID: 100081712017
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 100392087028
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 100392087020
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 100392087025
Board Certified: 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: 1871099333
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SNYDER, BRIAN
Provider ID: 100026208044
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 100346340032
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 100346340007
Board Certified: 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: WC
Hours: SU 8AM-8PM M-F 8AM-5PM SA 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 100072051052
Board Certified: 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 CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 100072051049
Board Certified: No

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 100072051048
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 100072051062
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6400
Fax: (619) 543-3115
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TORRES, ERICK
Provider ID: 100446092010
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, COAST PLAZA HOSPITAL, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WARDI, GABRIEL
Provider ID: 100285449074
Board Certified: No
UCSD MEDICAL GROUP
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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WAYMENT, ANDREW
Provider ID: 100431837014
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, PALMDALE REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WITUCKI, PETER
Provider ID: 100050086047
Board Certified: 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: 1548205537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER,

D. Red de proveedores médicos especialistas

PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WITUCKI, PETER
Provider ID: 100050086048
Board Certified: No
UCSD MEDICAL GROUP
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: 1548205537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN
Provider ID: 100360199006
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225425697
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE
Provider ID: 100408744018
Board Certified: No
UCSD MEDICAL GROUP
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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE
Provider ID: 100408744028
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

AHMAD, AAKIF
Provider ID: 100244577037
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: 20A12732
NPI: 1720308331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

AHMAD, AAKIF
Provider ID: 100244577037
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: 20A12732
NPI: 1720308331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

DECAMPS, SCARLETT
Provider ID: 100442305009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

EKANAYAKE, PREETHIKA
Provider ID: 100377360004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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: P, EB, IB, E, R, T, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

EKANAYAKE, PREETHIKA
Provider ID: 100377360006
Board Certified: 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: P, EB, IB, E, R, T, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN
Provider ID: 100342345001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: A113255
NPI: 1912051715
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN
Provider ID: 100342345001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: A113255
NPI: 1912051715
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 100333866003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 100333866003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 100189839007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 100133064007
Board Certified: 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

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

LEVINE, MATTHEW
Provider ID: 100052770020
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

LEVINE, MATTHEW
Provider ID: 100052770020
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

LORENZO, PATRICIA
Provider ID: 100348242004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

LORENZO, PATRICIA
Provider ID: 100348242004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

MCCALLUM, JAMES
Provider ID: 100032026020
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: A55708
NPI: 1609838994
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

MCCALLUM, JAMES
Provider ID: 100032026020
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: A55708
NPI: 1609838994
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME

ENDOCRINOLOGY METABOLISM DIABETES

MCCALLUM, JAMES
Provider ID: 100032026020
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: A55708
NPI: 1609838994
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME

D. Red de proveedores médicos especialistas

Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

ENDOCRINOLOGY METABOLISM DIABETES

PHATAK, SONAL
Provider ID: 100106442035
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PHATAK, SONAL
Provider ID: 100106442034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA
Provider ID: 100106874008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

ALDERSON, CHEVON
Provider ID: 100454419003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

FAMILY PRACTICE

BELL, TRACY

Provider ID: 100424087003

Board Certified: 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

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BELL, TRACY

Provider ID: 100424087004

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1497821318

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL): N

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 100354594024

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 100354594018

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

CARRAGEE, CATHERINE

Provider ID: 100446093005

D. Red de proveedores médicos especialistas

Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 100339226015
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 100339226009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 100339226007
Board Certified: 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: WC
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

FAMBRO, CYNTHIA
Provider ID: 100350838007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-1954
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1710331707
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: P, EB, IB, E, R, T
Hours: SU 10AM-4PM
M-TU 8:30AM-8PM
W-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

HONG, DANA
Provider ID: 100442276005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
Provider ID: 100408776031
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
Provider ID: 100408776028
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (858) 249-6890
After Hours Phone: (858) 249-6890
Provider Gender: Female
NPI: 1114366192
Provider English Spoken: Y
Cultural Competency: N
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

FAMILY PRACTICE

JOLICOEUR, MEGAN

D. Red de proveedores médicos especialistas

Provider ID: 100408776029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
Provider ID: 100408776030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

KIDDER, BRENDAN
Provider ID: 100334556007
Board Certified: 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: 1275793929
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: P, IB, E, T
Hours: M-TU 8:30AM-8PM
W-F 8:30AM-5:30PM
SA 8:30AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

KUROSAKA, MOMO
Provider ID: 100043417017
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

KUROSAKA, MOMO
Provider ID: 100043417016
Board Certified: No

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205848363
Provider English Spoken: Y
Cultural Competency: N
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

FAMILY PRACTICE

MARTINEZ, BRIANNA
Provider ID: 100442340005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

RIDGE, NEAL
Provider ID: 100356750013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROSADO, IVAN
Provider ID: 100365788010
Board Certified: 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
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: 100442328005
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

SARDINHA, MANUEL
Provider ID: 100465154006
Board Certified: 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: 1356090872
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SARDINHA, MANUEL
Provider ID: 100465154008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4600
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1356090872
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON
Provider ID: 100445143005
Board Certified: 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
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON
Provider ID: 100445143012
Board Certified: 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
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

FAMILY PRACTICE

SHMERLING, ALISON

Provider ID: 100445143010

Board Certified: 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

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON

Provider ID: 100445143008

Board Certified: 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

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

VAN PRATT LEVIN, BENJAMIN

Provider ID: 100418258002

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

VO, PHU LUONG

Provider ID: 100415527005

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

LUKACZ, EMILY
Provider ID: 100040606017
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 100040606019
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 100333867007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 100333867023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

GASTROENTEROLOGY

BAUMAN, LAURA
Provider ID: 100336971016
Board Certified: 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: P, EB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GASTROENTEROLOGY

BRANCH, LAUREL
Provider ID: 100445877017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

BRANCH, LAUREL
Provider ID: 100445877020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN
Provider ID: 100039339012
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

CHAVEZ, LUIS
Provider ID: 100442545004

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 100360703009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 100360703034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA
Provider ID: 100456056005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA
Provider ID: 100456056012
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

HAI, FAIZI
Provider ID: 100414604001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

GASTROENTEROLOGY

HAI, FAIZI
Provider ID: 100414604001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

GASTROENTEROLOGY

KRAUSE, AMANDA
Provider ID: 100446081015
Board Certified: No
UCSD MEDICAL GROUP
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: 1528561305
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUMAR, SOMA
Provider ID: 100263971004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 100445794017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 100445794020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 100446074020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 100446074017
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

OLIVER, DEANNA
Provider ID: 100328564048
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

GASTROENTEROLOGY

OLIVER, DEANNA
Provider ID: 100328564048
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

GASTROENTEROLOGY

POLK, DAVID
Provider ID: 100000068011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1427140839
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 100375863036
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 100375863004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1073803243
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

STIPHO, SALLY
Provider ID: 100007555018
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

GASTROENTEROLOGY

STIPHO, SALLY
Provider ID: 100007555018

D. Red de proveedores médicos especialistas

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

GASTROENTEROLOGY

TSAI, MATTHEW
Provider ID: 100353304023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 100405598024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 100405598017
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1265887723
Provider English Spoken: Y
Cultural Competency: N
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

GENETICS MEDICAL

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

DEL CAMPO CASANELLES, MIGUEL
Provider ID: 100255074008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GENETICS MEDICAL

NIEMI, ANNA-KAISA
Provider ID: 100198334018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 100112511031
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 100112511033
Board Certified: No
COMMUNITY CARE IPA LLC
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Phone: (858) 278-9911

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

GALLAGHER, JEFFERY
Provider ID: 100434665010
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (619) 426-0714
After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1457926370
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM
Provider ID: 100445329013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM
Provider ID: 100445329010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI
Provider ID: 100419586015
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, CHUNG-JIAH
Provider ID: 100362567015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOUEIRI, MICHEL
Provider ID: 100213863029
Board Certified: 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: 1780991869
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOUEIRI, MICHEL
Provider ID: 100213863028
Board Certified: 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: 1780991869
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

LEE, KAREN
Provider ID: 100376519003
Board Certified: 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

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY
Provider ID: 100348066015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

OGUNLEYE, FOLUSO
Provider ID: 100458728024
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Phone: (619) 872-0953
Fax: (619) 872-0953
After Hours Phone: (619) 872-0953
Provider Gender: Male
NPI: 1972766772
Provider English Spoken: Y
Provider Language(s) Spoken: Nigerian
Cultural Competency: N
Hospital Affiliation: MOUNTAINVIEW HOSP, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 18\99
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEMATOLOGY / ONCOLOGY

PAUL, MEGAN
Provider ID: 100364098003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY STE 2W
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1427495894
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEMATOLOGY / ONCOLOGY

VU, PETER
Provider ID: 100362638003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY
Provider ID: 100363043003
Board Certified: 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: P, EB, R, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN-YOU
Provider ID: 100111838013
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689633729
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN-YOU
Provider ID: 100111838017
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN-YOU
Provider ID: 100111838057
Board Certified: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR STE 150
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
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 100348239007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208065
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208025
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208025
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.lamaestra.org

HEPATOLOGY

GISH, ROBERT
Provider ID: 100051208065
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A

HEPATOLOGY

HASSANEIN, TAREK
Provider ID: 100022863169
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
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, Parkview Community Hospital Medical Center, RIVERSIDE COMMUNITY HOSP, RIVERSIDE COMMUNITY HOSP, MISSION COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, ORANGE COAST MEM MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org
Medical Group(s): JOHN C FREMONT HOSPITAL,

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

SADDLEBACK MEMORIAL MED CTR, PALOMAR MEDICAL CENTER, HOAG HOSPITAL IRVINE

HEPATOLOGY

HASSANEIN, TAREK

Provider ID: 100022863169

Board Certified: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

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, Parkview Community Hospital Medical Center, RIVERSIDE COMMUNITY HOSP, RIVERSIDE COMMUNITY HOSP, MISSION COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, ORANGE COAST MEM MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.opsam.org

Medical Group(s): JOHN C FREMONT HOSPITAL, SADDLEBACK MEMORIAL MED CTR, PALOMAR MEDICAL CENTER, HOAG HOSPITAL IRVINE

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA

Provider ID: 100245868023

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA

Provider ID: 100245868014

Board Certified: No

UCSD MEDICAL GROUP

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

WINTERS, KATHRYN
Provider ID: 100321722032
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-9185
After Hours Phone: (619) 471-9185
Provider Gender: Female
NPI: 1790128924
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 100063248013
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

FIRESTEIN, CATHERINE
Provider ID: 100334021005
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

HAMMOND, CHARLES
Provider ID: 100368385004
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

KUPELIAN, CHLOE
Provider ID: 100379318004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

ALDOUS, JEANNETTE
Provider ID: 100134749017
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

BORTNER, ADAM
Provider ID: 100356320008
Board Certified: 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: Male
NPI: 1811491749
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
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

DEISS, ROBERT
Provider ID: 100356961003
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

HORTON, LUCY
Provider ID: 100347433003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427324821
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

MARTIN, THOMAS
Provider ID: 100366925006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

MARTIN, THOMAS
Provider ID: 100366925004
Board Certified: 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: WC
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

MOODLEY, AMARAN
Provider ID: 100339906003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

PANNARAJ, PIA
Provider ID: 100035994010
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Female
NPI: 1942478524
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

WILKIN, TIMOTHY
Provider ID: 100441951005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

ARUTYUNOV, BORIS
Provider ID: 100249648017
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BALL, SHELDON
Provider ID: 100394482004
Board Certified: 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
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BALL, SHELDON
Provider ID: 100394482003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1689646275
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BORDIN-WOSK, TALYA
Provider ID: 100214642011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CACHAY, EDWARD
Provider ID: 100112318027
Board Certified: No
UCSD MEDICAL GROUP
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: 1336290071
Provider English Spoken: Y
Provider Language(s) Spoken: French, 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CHENG, GEORGE
Provider ID: 100352502003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DEISS, ROBERT
Provider ID: 100356961013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA
Provider ID: 100329385012
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

INTERNAL MEDICINE

FEUVRIER, ARIANA
Provider ID: 100454707010
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FOX, SUTTON
Provider ID: 100445814010
Board Certified: No
UCSD MEDICAL GROUP
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): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO
Provider ID: 100040290019
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497791339
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO
Provider ID: 100040290015
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497791339
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

GUPTA, VINEET
Provider ID: 100220913025
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1942431069
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

HASTIE, ELIZABETH
Provider ID: 100386851005
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

HOGARTH, MICHAEL
Provider ID: 100030665014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

IBARRA, ALLISON
Provider ID: 100444808006
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

JABBOUR, MOUSSA
Provider ID: 100355609006

D. Red de proveedores médicos especialistas

Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KATZ, YISRAEL
Provider ID: 100362811003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA
Provider ID: 100320457011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS
Provider ID: 100344845004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL
Provider ID: 100363988009
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1578974259
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, E, R, T, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL
Provider ID: 100363988007
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1578974259
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, E, R, T, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LEVERONE, NICHOLAS
Provider ID: 100362595003
Board Certified: No
UCSD MEDICAL GROUP
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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MAJITHIA, AMIT
Provider ID: 100354994006
Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MARINO, NIKOLAS
Provider ID: 100445902010
Board Certified: No
UCSD MEDICAL GROUP
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: 1316523988
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NGUYEN, MICHELLE
Provider ID: 100442331013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NGUYEN, MICHELLE
Provider ID: 100442331014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOKES, BRANDON
Provider ID: 100381238008
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOVIKOV, YEVGENY
Provider ID: 100446877008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

QURESHY, ZOYA
Provider ID: 100457259010
Board Certified: No
UCSD MEDICAL GROUP
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: 1457937815
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SAHA, SRISHTI
Provider ID: 100454661007
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 100142047013
Board Certified: 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

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SIRIPHAND, CHRISTOPHER
Provider ID: 100433587011
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SMITH, CHELSEY
Provider ID: 100317826008
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (858) 657-6110
After Hours Phone: (858) 657-6110
Provider Gender: Female
NPI: 1013264506
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

TAYLOR, DAVID
Provider ID: 100364058003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

THOMAS, ROBERT
Provider ID: 100345144003
Board Certified: 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): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

TRAN, HAO
Provider ID: 100104852013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA
Provider ID: 100103437017
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730133976
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA
Provider ID: 100103437015
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (855) 355-5864
Fax: (888) 539-8781
After Hours Phone: (855) 355-5864
Provider Gender: Female
NPI: 1730133976
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WEBSTER, LUKE
Provider ID: 100362575003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

D. Red de proveedores médicos especialistas

926-8273
Provider Gender: Male
NPI: 1235660887
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WONG, JUSTIN
Provider ID: 100446034010
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 100366954008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 100366954013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

INTERNAL MEDICINE

ZHANG, SHERRY
Provider ID: 100362540003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1588198147
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AFSHAR, KAMYAR
Provider ID: 100021138034
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AKUTHOTA, PRAVEEN
Provider ID: 100247906032
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AKUTHOTA, PRAVEEN
Provider ID: 100247906033
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BARNES, LAURA
Provider ID: 100332627020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BARNES, LAURA
Provider ID: 100332627018
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 100113987015
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 100113987023
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR STE 3-313
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 100113987020
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 100018428016
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 100018428013
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800) 926-5273
Provider Gender: Female
NPI: 1750317251
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 100018428010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

CROUCH, DANIEL
Provider ID: 100213901030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

DEWOLF, SEAN
Provider ID: 100405676009
Board Certified: No
UCSD MEDICAL GROUP
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, 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

HEPOKOSKI, MARK
Provider ID: 100287569019
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

IBRAHIM, ISLAM
Provider ID: 100145311027
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

JOHN, MIRA
Provider ID: 100442402014
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

NPI: 1013448588
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

JOHN, MIRA
Provider ID: 100442402013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KAMDAR, BIREN
Provider ID: 100194647038
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 100393546019
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 100393546020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 100393546021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 100361250005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 100361250008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 100361250012
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ORR, JEREMY
Provider ID: 100144650040
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ORR, JEREMY
Provider ID: 100144650041
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PAGE, BRADY
Provider ID: 100433171014
Board Certified: 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: EL CENTRO REGIONAL MEDICAL CENTER, 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

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 100332067020
Board Certified: No

UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
GERIATRIC MEDICINE

AGNIHOTRI, PARAG
Provider ID: 100038479007
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447351085
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
Provider ID: 100141935038
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
Provider ID: 100141935037
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
Provider ID: 100141935037
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 100328938037
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 100328938030
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 100328938046
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ANG, LAWRENCE
Provider ID: 100311385016
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN
Provider ID: 100437654003
Board Certified: 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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN
Provider ID: 100437654020
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN
Provider ID: 100437654013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 100400812007
Board Certified: No
UCSD MEDICAL GROUP
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: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 100400812020
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 100400812030
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 100400812025
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

NPI: 1457770240
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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

GUPTA, TRIPTI
Provider ID: 100445976010
Board Certified: 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: 1306290242
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

KRUMMEN, DAVID
Provider ID: 100030816019
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
Provider ID: 100441942013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
Provider ID: 100441942020
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
Provider ID: 100441942010
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 100347636003
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 100347636022
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
SAN DIEGO, CA 92101
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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, GARY
Provider ID: 100344824009
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 100347636015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MAHMUD, EHTISHAM
Provider ID: 100051553025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 100344561050
Board Certified: 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, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL

D. Red de proveedores médicos especialistas

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 100344561008

Board Certified: No

COMMUNITY CARE IPA LLC

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619) 616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 100009399032

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 100009399032

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

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

D. Red de proveedores médicos especialistas

HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

INTERVENTIONAL CARDIOLOGY

REEVES, RYAN
Provider ID: 100202047015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TORRES BARBA, DAVID
Provider ID: 100397470011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TORRES BARBA, DAVID
Provider ID: 100397470025
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE STE 300
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
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

UREY, MARCUS

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100321173016
Board Certified: 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
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, 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

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 100330307028
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY
Provider ID: 100346129029
Board Certified: 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: 1356846349
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
Website: N/A
IPA: UCSD Medical Group

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY
Provider ID: 100346129003
Board Certified: 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: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 100405600023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 100405600024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 100405600022
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292044
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292045
Board Certified: No
UCSD MEDICAL GROUP
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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292041
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292037
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292040
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292038
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 100457292039
Board Certified: 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: 1407352743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 100049168013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 100444865015
Board Certified: No
UCSD MEDICAL GROUP
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
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 100444865019
Board Certified: 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
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 100444865013
Board Certified: 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
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 100374854004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE
Provider ID: 100281008004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL

D. Red de proveedores médicos especialistas

MEDICINE

DEL ROSARIO, PAMELA
Provider ID: 100293804008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1952691941
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH
Provider ID: 100278405005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 260-7046
Fax: (619) 686-3843
After Hours Phone: (619) 260-7046
Provider Gender: Female
NPI: 1679809826
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

GLENN, TARA
Provider ID: 100374741003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1992060974
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA
Provider ID: 100393994005
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE
Provider ID: 100068156011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1093886855
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE
Provider ID: 100068156014
Board Certified: 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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

NEONATAL / PERINATAL MEDICINE

LANE, BRIAN

Provider ID: 100051915007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 100145578006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 100403129031
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 100403129009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 100403129022
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 966-7483
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 100403129010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Network

NEONATAL / PERINATAL MEDICINE

MCCULLEY, DAVID

Provider ID: 100366906003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 100198334013
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 100198334014
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 260-7107
After Hours Phone: (619) 260-7107
Provider Gender: Female
NPI: 1497941397
Provider English Spoken: Y
Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 100413994013
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 100413994016
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

ODONNELL, F

Provider ID: 100051297009
Board Certified: 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 HOSPITAL, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

PHAM, BETTY
Provider ID: 100358704013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO
Provider ID: 100216712011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 100143665020
Board Certified: 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,

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 100143665017
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK
Provider ID: 100019303011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

D. Red de proveedores médicos especialistas

Provider ID: 100196389007
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1164572632
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 100397293009
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEPHROLOGY

RIFKIN, DENA
Provider ID: 100002319033
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

ZHONG, YAN
Provider ID: 100217994016
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

ZHONG, YAN
Provider ID: 100217994015
Board Certified: 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
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEUROLOGY

BUI, JONATHAN
Provider ID: 100104833040
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

BUI, JONATHAN
Provider ID: 100104833055
Board Certified: 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)

D. Red de proveedores médicos especialistas

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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network

NEUROLOGY

CANTU-REYNA, GUILLERMO
Provider ID: 100214575002
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
- *Phone: (619) 255-9155*
- *After Hours Phone: (619) 255-9155*

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
- *Website: www.lamaestra.org*

NEUROLOGY

CANTU-REYNA, GUILLERMO
Provider ID: 100214575002
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
- *Phone: (619) 255-9155*
- *After Hours Phone: (619) 255-9155*

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
- *Website: www.lamaestra.org*

NEUROLOGY

DOVE, KATHERINE
Provider ID: 100418749003
Board Certified: 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

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

DUNN-PIRIO, ANASTASIE
Provider ID: 100333314025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

DUNN-PIRIO, ANASTASIE
Provider ID: 100333314002
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781
After Hours Phone: (619) 543-3500
Provider Gender: Female
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

FOLSOM, DAVID
Provider ID: 100246799009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Provider Gender: Male
License Number: A65435
NPI: 1710026612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8:30AM-5PM
Website: N/A

NEUROLOGY

FOLSOM, DAVID
Provider ID: 100246799009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Provider Gender: Male
License Number: A65435
NPI: 1710026612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Accessibility: EB, IB, E
Hours: M-F 8:30AM-5PM
Website: N/A

NEUROLOGY

GHOLIPOUR, TAHA
Provider ID: 100422147013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GHOLIPOUR, TAHA
Provider ID: 100422147014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GOLD, JEFFREY
Provider ID: 100212423030
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 100212423032
Board Certified: 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: 1568773984
Provider English Spoken: Y
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GUIDO-ESTRADA, NATALIE
Provider ID: 100293954019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GUNDOGDU, MELEK
Provider ID: 100333207004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

HANNAWI, ANDREW
Provider ID: 100374731003
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY

HEADLEY, ALISON

Provider ID: 100376791017
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

HEADLEY, ALISON

Provider ID: 100376791018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ILICETO, ALESSANDRO

Provider ID: 100445893010
Board Certified: No
UCSD MEDICAL GROUP
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: 1831685577
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 100069645023
Board Certified: 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
American Sign Language (ASL): N
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE
Provider ID: 100069645029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 100441982013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 100441982017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 100441982009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA
Provider ID: 100042901031

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA
Provider ID: 100042901033
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KHAMISHON, BORIS
Provider ID: 100107230018
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

KIM MCMANUS, OLIVIA
Provider ID: 100290462021
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1174870067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

LAVERTY, CHAMINDRA
Provider ID: 100219564031
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

LEE, DAVID
Provider ID: 100334049034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID
Provider ID: 100334049027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID
Provider ID: 100334049004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE
Provider ID: 100359283014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE
Provider ID: 100359283003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LUHAR, RIYA
Provider ID: 100398558027
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

NEUROLOGY

LUHAR, RIYA
Provider ID: 100398558027
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

NEUROLOGY

MAHTA, ALI
Provider ID: 100450690006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

MARTIN, FREDERIC
Provider ID: 100021471005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

NEUROLOGY

MARTIN, FREDERIC
Provider ID: 100021471005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

D. Red de proveedores médicos especialistas

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

NEUROLOGY

PASSIAK, BRITTANY
Provider ID: 100441873011
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

NEUROLOGY

PASSIAK, BRITTANY
Provider ID: 100441873010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI
Provider ID: 100376947039
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

JOLLA JOHN SALLY THORNTON, 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

NEUROLOGY

QAYOUMI, WALI
Provider ID: 100376947007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA
Provider ID: 100165744007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA
Provider ID: 100165744020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 100285667036
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 100285667037
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 100285667034
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SWEAT, MARIE
Provider ID: 100418717003
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

TAFRESHI, GILDA
Provider ID: 100078929022
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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, SALINAS VALLEY HEALTH MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

NEUROLOGY

TAFRESHI, GILDA
Provider ID: 100078929022
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
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, SALINAS VALLEY HEALTH MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

NEUROLOGY

TECOMA, EVELYN
Provider ID: 100032777029
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

TECOMA, EVELYN
Provider ID: 100032777031
Board Certified: Yes
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

UNG, HOAMENG
Provider ID: 100442265009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

WU, VICTORIA
Provider ID: 100413006013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

YANG, JENNIFER
Provider ID: 100413560003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

ZALE, CHELSEA
Provider ID: 100445342010
Board Certified: 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: 1548615495
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ZALE, CHELSEA
Provider ID: 100445342008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ZALE, CHELSEA
Provider ID: 100445342013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ZIMBRIC, MICHAEL
Provider ID: 100041783027
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

ZIMBRIC, MICHAEL
Provider ID: 100041783032
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GRAVES, JENNIFER
Provider ID: 100144089010
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE
Provider ID: 100293954011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

PASSIAK, BRITTANY
Provider ID: 100441873017
Board Certified: 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

D. Red de proveedores médicos especialistas

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 100047044022
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 100047044017
Board Certified: No
UCSD MEDICAL GROUP
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
Provider Language(s) Spoken: Arabic, French
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 100047044025
Board Certified: 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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 100441980029
Board Certified: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 100441980032
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 100441980045
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 100441980021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 100441980025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

D. Red de proveedores médicos especialistas

Provider ID: 100441980027
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

BIVER, LAURA
Provider ID: 100444366038
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
Provider ID: 100008281009
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 100306202035
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 100306202027
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 100306202029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 100306202031
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 100306202098
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 100306202034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544027
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730507567
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY MARIE
Provider ID: 100349544108
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 100441933010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 100441933021
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FRUGONI, GINA
Provider ID: 100087957011
Board Certified: 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):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964026
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964028
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 100445964035
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
Provider ID: 100399307004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4682
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1235218439
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
Provider ID: 100399307003
Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 100368821005
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 100368821011
Board Certified: 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

D. Red de proveedores médicos especialistas

Provider English 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN
Provider ID: 100078658012
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
11939 RANCHO BERNARDO RD STE 110
SAN DIEGO, CA 92128
Phone: (858) 618-1156
Fax: (858) 618-3314
After Hours Phone: (858) 618-1156
Provider Gender: Female
NPI: 1679517239
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8:30AM-4:30PM F 8:30AM-2PM
Website: N/A
IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 100334516014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 100334516004
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 100333754048
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 100333754005
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1770702177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 100333754030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927015
Board Certified: 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

D. Red de proveedores médicos especialistas

Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927019
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927023
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 100441927026
Board Certified: 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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA

Provider ID: 100441927046
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 100379086012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 100379086009
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 100405680018
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA
Provider ID: 100405680017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA
Provider ID: 100445943015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA
Provider ID: 100445943013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

QENDRO, ISABELLA
Provider ID: 100444204035
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 100322103021
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 100322103023
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

VARON, SHIRA
Provider ID: 100012052050
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

CROSS, JOHN
Provider ID: 100189519065
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

D. Red de proveedores médicos especialistas

KIM, JOHN
Provider ID: 100354672003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

ACOSTA-MARISCAL, JANICE
Provider ID: 100437089001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: OT26123
NPI: 1194571984
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OCCUPATIONAL THERAPIST

ACOSTA-MARISCAL, JANICE
Provider ID: 100437089001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: OT26123
NPI: 1194571984
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE
Provider ID: 100213772006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 100213772008
Board Certified: 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, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

JEFFERIES, KATHLEEN

Provider ID: 100052102010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

LARSEN, JULIE

Provider ID: 100339754004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

LUCAS, MARIA

Provider ID: 100279954003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: OT4080
NPI: 1427466952
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME

Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OCCUPATIONAL THERAPIST

LUCAS, MARIA
Provider ID: 100279954003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: OT4080
NPI: 1427466952
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OCCUPATIONAL THERAPIST

SHELTON, ALYSSA
Provider ID: 100324559006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

ALLEN, RACHAEL
Provider ID: 100454131008
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

ALLEN, RACHAEL
Provider ID: 100454131004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 100042994029

Board Certified: 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

Min/Max Age: 0\19

American Sign Language (ASL): N

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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 100362689007

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 100362689009

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 100329999006

Board Certified: No

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 100446792030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 100446792017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 100445809025
Board Certified: No
UCSD MEDICAL GROUP
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
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 100445809022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER
Provider ID: 100053313007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 100402237008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 100402237012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 100446906009
Board Certified: 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: 1982232542
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 100446906018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 100446795013
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HUYNH, PAUL
Provider ID: 100104919029
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone: (619) 283-1303
Provider Gender: Male
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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: 100104919019
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100316851019
Board Certified: 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, 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

KLINE, LANNING
Provider ID: 100346381003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

LI, ALEXANDRIA
Provider ID: 100362721006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

LIU, YUNXIANG
Provider ID: 100330991007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 100041362028
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 100342946011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

NAJAFI, DAVID
Provider ID: 100007783011
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OPHTHALMOLOGY

NAJAFI, DAVID
Provider ID: 100007783011
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 100441934009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA

D. Red de proveedores médicos especialistas

Provider ID: 100441934013
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 100007418032
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 100445977018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 100445977015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PUIG-LLANO, MANUEL
Provider ID: 100077505007
Board Certified: No

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

SHAW, BLAKE
Provider ID: 100089518005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: G61394
NPI: 1649206541
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OPHTHALMOLOGY

SHAW, BLAKE
Provider ID: 100089518005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: G61394
NPI: 1649206541
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

OPHTHALMOLOGY

SHAW, BLAKE
Provider ID: 100089518007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

NPI: 1649206541
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

OPHTHALMOLOGY

SHAW, BLAKE
Provider ID: 100089518007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Male
License Number: G61394
NPI: 1649206541
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160079
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160079
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

OPHTHALMOLOGY

VAIL, DANIEL
Provider ID: 100446001020
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL
Provider ID: 100446001017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

YAMADA, KENTARO
Provider ID: 100037602018
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1040 UNIVERSITY AVE STE B209A
SAN DIEGO, CA 92103
Phone: (619) 299-1100
Fax: (619) 299-7156
After Hours Phone: (619) 299-1100
Provider Gender: Male
NPI: 1629047188
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 100443808008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 100443808012
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

ZABLIT, KARIM
Provider ID: 100029373023
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8AM-4:45PM
Website: N/A

OPHTHALMOLOGY

ZABLIT, KARIM
Provider ID: 100029373023
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8AM-4:45PM
Website: N/A

OPTOMETRIST

DUONG, NGHI
Provider ID: 100441394015
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

DUONG, NGHI
Provider ID: 100441394011
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 100405512024
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: N
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

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 100405512023
Board Certified: 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): N
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

KIM, PHILIP
Provider ID: 100374880027
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

SCHWAB, GARY
Provider ID: 100049487009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Male
NPI: 1740274372
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

SCHWAB, GARY
Provider ID: 100049487007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1740274372
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

VO, ANDREW
Provider ID: 100333683006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

VO, ANDREW
Provider ID: 100333683030
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 100356621037
Board Certified: 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: 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):

D. Red de proveedores médicos especialistas

N
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 100356621035
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 100356621020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

ORAL MAXILLOFACIAL SURGEON

DENTICO-OLIN, MARC
Provider ID: 100302405014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

ORAL MAXILLOFACIAL SURGEON

DENTICO-OLIN, MARC
Provider ID: 100302405016
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 100293581019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839045
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839044
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839058
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 100333839040
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CARVALHO, DANIELA
Provider ID: 100111076021
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CARVALHO, DANIELA
Provider ID: 100111076015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714050
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714046
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6631
Fax: (619) 471-0656
After Hours Phone: (619) 543-6631
Provider Gender: Male
NPI: 1932297330
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714062
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 100166714049
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801053
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801068
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801054
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 100214801055
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1588988919
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 100439457011
Board Certified: No

D. Red de proveedores médicos especialistas

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
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702058
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702044
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 100292702046
Board Certified: No
UCSD MEDICAL GROUP
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 JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

GILANI, SAPIDEH
Provider ID: 100292702045
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164051
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164066
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 100104164052
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135043
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135059
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135046
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 100337135047
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB
Provider ID: 100146630021
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB
Provider ID: 100146630033
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB
Provider ID: 100146630025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

JIANG, WEN
Provider ID: 100106559018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967082
Board Certified: 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: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967081
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 100189967079
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 100136251025
Board Certified: 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 DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625056
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625042
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625043
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 100401625044
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 100397112016
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Male
NPI: 1508250747
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PEREZ, ANGEL
Provider ID: 100445330013
Board Certified: 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: 1881841971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

QIAN, ZHEN
Provider ID: 100441971006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

SURESH, KRISH
Provider ID: 100455391006
Board Certified: 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: 1861867103
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642077
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642062
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642063
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 100319642064
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248052
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248049
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248051
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 100065248065
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368068
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368055
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368056
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 100148368051
Board Certified: 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: WC
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 100319364032
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, 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

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 100319364031
Board Certified: 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
Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 100319364061
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 100319364024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

FADARE, OLUWOLE

Provider ID: 100214619006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

HANSEN, LAWRENCE

Provider ID: 100038005008
Board Certified: 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

D. Red de proveedores médicos especialistas

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA
Provider ID: 100009931011
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD
Provider ID: 100349413003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO
Provider ID: 100332804026
Board Certified: 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 MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH
Provider ID: 100334228004
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
Provider ID: 100077431011
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
Provider ID: 100077431012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 100206017008

D. Red de proveedores médicos especialistas

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 100206017006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

MCKNIGHT, TRISTAN
Provider ID: 100443298003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES
Provider ID: 100306679006
Board Certified: No
UCSD MEDICAL GROUP
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 MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED
Provider ID: 100089383009
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679521579
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SONG, WEI
Provider ID: 100405577004
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

STEPHENS, LAURA
Provider ID: 100405648004
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA
Provider ID: 100229865007
Board Certified: No
UCSD MEDICAL GROUP
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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

WANG, DEHUA
Provider ID: 100379061003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PATHOLOGY ANATOMIC CLINICAL

WONG, RICHARD
Provider ID: 100349413025
Board Certified: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
STE 150
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
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

BUI, JACK
Provider ID: 100206017036
Board Certified: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
STE 150
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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 100047349010

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 100047349038

Board Certified: No

UCSD MEDICAL GROUP

10300 CAMPUS POINT DR
STE 150
SAN DIEGO, CA 92121

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

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 100047349008

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY CLINICAL

SONG, WEI

Provider ID: 100405577012

Board Certified: No

UCSD MEDICAL GROUP

10300 CAMPUS POINT DR
STE 150
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
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

STEPHENS, LAURA
Provider ID: 100405648012
Board Certified: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR STE 150
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
Website: N/A
IPA: UCSD Medical Group

PEDIATRIC ALLERGY / IMMUNOLOGY

ALKATIB, RHONDA
Provider ID: 100352364084
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 100244106018
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 100244106017
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY
Provider ID: 100246839009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY
Provider ID: 100246839014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY
Provider ID: 100246839010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

BOCK, MATTHEW
Provider ID: 100246555013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO
Provider ID: 100376287006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

CHAU, PETER
Provider ID: 100341375013
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

D. Red de proveedores médicos especialistas

DAVIS, CHRISTOPHER
Provider ID: 100027737021
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1760691950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN
Provider ID: 100332559023
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

GOLDING, IAN
Provider ID: 100341130003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

GORDON, BRENT
Provider ID: 100072727030
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 100321174015
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

JUSTINO, HENRI
Provider ID: 100376289003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 100446632012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LEHNERT SCHUCHARDT, ELEANOR

Provider ID: 100332071008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1760707210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 100219076010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 100297546014
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

STEINBERG, LEONARD

Provider ID: 100352961003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY

D. Red de proveedores médicos especialistas

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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

VAUGHN, GABRIELLE
Provider ID: 100250013006
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7423
After Hours Phone: (858) 966-5855
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: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

WANG-GIUFFRE, ELIZABETH
Provider ID: 100450834003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW
Provider ID: 100247116004
Board Certified: 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): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 100374719003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 100374719008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 100419888009
Board Certified: 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: 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
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: 100419888014
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AUSTIN-PAGE, LUKAS
Provider ID: 100189740011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

BIALOSTOZKY, MARIO
Provider ID: 100245662018
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

BRYL, AMY
Provider ID: 100216880021
Board Certified: 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

D. Red de proveedores médicos especialistas

Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: WC
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CAMPBELL, SARA
Provider ID: 100246418006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN
Provider ID: 100156641014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN
Provider ID: 100156641016
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CONRAD, HEATHER
Provider ID: 100024792011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL
Provider ID: 100435004009
Board Certified: 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
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: 100435004008
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEL RE, ANGELO
Provider ID: 100216898006
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1275761371
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
Provider ID: 100057498011
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE
Provider ID: 100343545009
Board Certified: 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: 1750513644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin Luther King Jr Community Hospital, 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

D. Red de proveedores médicos especialistas

Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DONOFRIO-ODMANN, JOY
Provider ID: 100198179008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1740571165
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

EKPENYONG, ATIM
Provider ID: 100239519008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

FISHER, JAY
Provider ID: 100398737003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

D. Red de proveedores médicos especialistas

GORHAM, LAURA
Provider ID: 100365371005
Board Certified: 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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

HERSKOVITZ, SCOTT
Provider ID: 100330369005
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ISHIMINE, PAUL
Provider ID: 100081718017
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KHAN, SHAHFAR
Provider ID: 100392068003
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA
Provider ID: 100417084007
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1609495399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KRAK, MICHAEL
Provider ID: 100440776005
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 100198516017
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 100198516013
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCEVOY, ANNE
Provider ID: 100441469004
Board Certified: 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, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL
Provider ID: 100397382007
Board Certified: 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
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: 100365221004
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY
Provider ID: 100247118004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID
Provider ID: 100416724004
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MURRAY, MATTHEW
Provider ID: 100189635018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MARGARET
Provider ID: 100216677005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1942485248
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MYLINH
Provider ID: 100330365004
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI

Provider ID: 100376572008
Board Certified: 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, 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PADE, KATHRYN

Provider ID: 100239509009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1215375183
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD

Provider ID: 100077687032
Board Certified: 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
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 100416430005
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

PERTL, URSULA

Provider ID: 100072222032
Board Certified: 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: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 100343547004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

MEDICINE

RAWANI-PATEL, PRITI

Provider ID: 100465172004
Board Certified: 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: 1376957027
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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

ROBERTS, CALE

Provider ID: 100441436004
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

RUSSELL, SAMUEL

Provider ID: 100410838011
Board Certified: 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
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

RUSSELL, SAMUEL

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Provider ID: 100410838010
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SADRE, SARAH
Provider ID: 100472511007
Board Certified: 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: 1972169845
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\19
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SALEH, FAREED
Provider ID: 100322032008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE
Provider ID: 100349875003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1073951828
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY
Provider ID: 100376522003
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA
Provider ID: 100352939003
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
Provider ID: 100166031011
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 100166031010
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1851540199
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TAMAS, VANESSA

Provider ID: 100096641006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW

Provider ID: 100395379005
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 100338040016
Board Certified: No

RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1407299787
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA
Provider ID: 100350518006
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1417496985
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ULRICH, STACEY
Provider ID: 100049320009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8036
After Hours Phone: (858) 966-8036
Provider Gender: Female
NPI: 1619049236
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 100198556019
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY

SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 100198556021
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAN WOY, LAUREN
Provider ID: 100369867007
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1568959161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VANE, JACKSON
Provider ID: 100322865003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1952608580
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAYNGORTIN, TATYANA
Provider ID: 100247782008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1578967907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VEGA, CAROLINA
Provider ID: 100439174008
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

WANG, VINCENT
Provider ID: 100015050008
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

WANG, YVETTE
Provider ID: 100320539004
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

YAPHOCKUN, KAREN KIM
Provider ID: 100310729007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

YIM, WESLEY
Provider ID: 100469211005
Board Certified: 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: 1457988537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

D. Red de proveedores médicos especialistas

ARAFAH, DEEMA
Provider ID: 100437228004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

CYMBALUK, ANNA
Provider ID: 100392006003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

PATTERSON, MARY
Provider ID: 100236163017
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

PATTERSON, MARY
Provider ID: 100236163009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858)

966-4032
Provider Gender: Female
NPI: 1912112020
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 100110456019
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA
Provider ID: 100419234004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

VARGAS TRUJILLO, MARCELA
Provider ID: 100258755005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-4032
After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1952534091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 100413678011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Male
NPI: 1912369273
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 100440955007
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 100440955010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

GOYAL, NIDHI

D. Red de proveedores médicos especialistas

Provider ID: 100212660010
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

GOYAL, NIDHI
Provider ID: 100212660006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

HARTMANN, PHILLIPP
Provider ID: 100393851003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

JAZAYERI, AMIR
Provider ID: 100441879004
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

KATIBIAN, DAVID
Provider ID: 100441882004
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

LIN, TOM
Provider ID: 100403898003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SCHWARZ, KATHLEEN
Provider ID: 100330298004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SHARMA, ANITA
Provider ID: 100443393004
Board Certified: 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

YOUNG, JOCELYN
Provider ID: 100333153009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

BRIGGS, BENJAMIN
Provider ID: 100364215003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

PEDIATRIC HEMATOLOGY / ONCOLOGY

CHOO, SUN
Provider ID: 100156641009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1700047628
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ELSTER, JENNIFER
Provider ID: 100287406004
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1588866115
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA
Provider ID: 100321465004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE
Provider ID: 100189831011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

KUO, DENNIS
Provider ID: 100230732005
Board Certified: 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 DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, KINCHEON
Provider ID: 100443160003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, HOJUN
Provider ID: 100431846003
Board Certified: 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
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LIOU, ANGELA
Provider ID: 100441929003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

SRIDHAR, SUNITA
Provider ID: 100414698003
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1649707365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR
Provider ID: 100280115005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, JENNIFER
Provider ID: 100220202005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA
Provider ID: 100412833003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1881127736
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ZAGE, PETER
Provider ID: 100276598006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC INFECTIOUS DISEASES

GRACIA, MICHAEL
Provider ID: 100457573005
Board Certified: 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: 1023570215
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND
Provider ID: 100384659003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 100441411013
Board Certified: 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: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 100441411003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 100441411019
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

EPPERSON, KATRINA
Provider ID: 100444649007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

EPPERSON, KATRINA
Provider ID: 100444649006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

INGULLI, ELIZABETH
Provider ID: 100018304010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 100439492013
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

AKONG, KATHRYN
Provider ID: 100166059022
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH
Provider ID: 100254897010
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH
Provider ID: 100254897007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 100216716011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 100216716008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

FINCH, CHRISTINA
Provider ID: 100407566015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, JEREMY
Provider ID: 100376541003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, JEREMY
Provider ID: 100376541006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 100395245011
Board Certified: 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): N
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA
Provider ID: 100325259009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

D. Red de proveedores médicos especialistas

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1649222340
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA
Provider ID: 100325259010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RYU, JULIE
Provider ID: 100013606009
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RYU, JULIE
Provider ID: 100013606006
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

TANTISIRA, KELAN
Provider ID: 100366915003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1760420434
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

CARTWRIGHT, VICTORIA
Provider ID: 100464884006
Board Certified: 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: 1174591747
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA
Provider ID: 100151228010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

LEVY, AVIYA
Provider ID: 100441433003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

PHADKE, OMKAR
Provider ID: 100452392004
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAYFL 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

ALAGIRI, MADHU
Provider ID: 100023640010
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

ANDREE, GREGOR
Provider ID: 100216073006
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

ANDREE, GREGOR
Provider ID: 100216073009
Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

BEAUCHAMP-WALTERS, JULIA
Provider ID: 100099212013
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1457420713
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CAMERON, MELISSA
Provider ID: 100202775009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CANTU, ALICIA
Provider ID: 100052223008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CANTU, ALICIA
Provider ID: 100052223009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CHONG, AMY
Provider ID: 100300066003
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5803
Fax: (858) 966-5992
After Hours Phone: (858) 966-5803
Provider Gender: Female
NPI: 1720423288
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: P, EB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

DOAN STEPHENS, CRYSTAL
Provider ID: 100350009005
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOAN STEPHENS, CRYSTAL
Provider ID: 100350009008

Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOSHI, AMI
Provider ID: 100010158008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

DOSHI, AMI
Provider ID: 100010158009
Board Certified: 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: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

EARLEY, SAMANTHA
Provider ID: 100442268003
Board Certified: 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

D. Red de proveedores médicos especialistas

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

GRAY, SARAH
Provider ID: 100374056006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

HUANG, MARIA
Provider ID: 100251548004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

JIMENEZ BACARDI, ADRIA
Provider ID: 100349441007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

KHARE, MANASWITHA
Provider ID: 100280152004

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

LEE, BEGEM
Provider ID: 100244036005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1053672444
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

LOPEZ, XIMENA
Provider ID: 100419308004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

MANNINO AVILA, ELIZABETH
Provider ID: 100220315004
Board Certified: 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

D. Red de proveedores médicos especialistas

HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

MILLS, TATYANA
Provider ID: 100439481007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

MILLS, TATYANA
Provider ID: 100439481008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI
Provider ID: 100068402019
Board Certified: 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

D. Red de proveedores médicos especialistas

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI
Provider ID: 100068402021
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1508910787
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PATEL, AARTI
Provider ID: 100279966004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PIERCE, HEATHER
Provider ID: 100028318008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

POLICH, MICHELLE
Provider ID: 100380639003
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK

D. Red de proveedores médicos especialistas

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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

POOLE, DAVID
Provider ID: 100442096003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

RHEE, KYUNG
Provider ID: 100163193011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

RIES, DAVID
Provider ID: 100214802010
Board Certified: 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

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

RUNGVIVATJARUS, TIRANUN
Provider ID: 100324001004
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1407276363
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

SAWYER, CAROLYN
Provider ID: 100351184022
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRICS

STOVER, LAURIE
Provider ID: 100047034004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY
Provider ID: 100324507013
Board Certified: 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

D. Red de proveedores médicos especialistas

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN
Provider ID: 100323974012
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1366589640
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA
Provider ID: 100218804015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE
Provider ID: 100365228021
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE
Provider ID: 100190325037
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW
Provider ID: 100047579020
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY
Provider ID: 100377311004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ALEXANDER, JAMIE
Provider ID: 100340384008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Male
License Number: PA55735
NPI: 1184117251
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

PHYSICIANS ASSISTANT

D. Red de proveedores médicos especialistas

ALEXANDER, JAMIE
Provider ID: 100340384008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Male
License Number: PA55735
NPI: 1184117251
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

PHYSICIANS ASSISTANT

ALVARADO, EDMUND
Provider ID: 100073894006
Board Certified: 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
Provider Gender: Male
License Number: PA20888
NPI: 1720303340
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

ALVARADO, EDMUND
Provider ID: 100073894006
Board Certified: 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
Provider Gender: Male
License Number: PA20888
NPI: 1720303340
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

ARMEEN, GARY
Provider ID: 100141496005
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1760774863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ARMENTA, JORGE
Provider ID: 100246129009
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

ARMENTA, JORGE
Provider ID: 100246129009
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
SA 8AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

BERGEN, SOPHEA
Provider ID: 100398417002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

BOYD, LISA
Provider ID: 100343639003
Board Certified: 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

D. Red de proveedores médicos especialistas

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE
Provider ID: 100354784006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 100023532007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA17220
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: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 100023532007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA17220
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: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 100023532007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 100023532007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA17220
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: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 100023532006
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA
Provider ID: 100342418002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M 8:30AM-5:30PM TU-W 8:30AM-5PM TH 8:30AM-9PM F 8:30AM-5PM
Website: N/A

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA
Provider ID: 100342418002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E

Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM
Website: N/A

PHYSICIANS ASSISTANT

DAVID, MARVIC
Provider ID: 100334755001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

DAVID, MARVIC
Provider ID: 100334755001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

DERISSI, DANA
Provider ID: 100215317011
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

DRAME, SALWA
Provider ID: 100378343002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Spoken: French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

DRAME, SALWA
Provider ID: 100378343002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

DU, SARAH
Provider ID: 100427390011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

DU, SARAH
Provider ID: 100427390008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FINK, PATRICK
Provider ID: 100334838002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D. Red de proveedores médicos especialistas

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

FINK, PATRICK
Provider ID: 100334838002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

GARCIA, DEANA
Provider ID: 100067216004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

GARCIA, DEANA
Provider ID: 100067216004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
Provider ID: 100433834016
Board Certified: No
UCSD MEDICAL GROUP
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: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
Provider ID: 100433834017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GUTH, CARA
Provider ID: 100373828008
Board Certified: 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
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HALTER, KENNETH
Provider ID: 100247514019
Board Certified: 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: 1053745059
Provider English Spoken: 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

PHYSICIANS ASSISTANT

HARVEY-SCHMIDT, JOSEPH
Provider ID: 100370779003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1104371251
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 100352106003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 100352106011
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225698962
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HERNANDEZ, GABRIELA
Provider ID: 100430362003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

HIGUERA, EDITH
Provider ID: 100386262010
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

HIGUERA, EDITH
Provider ID: 100386262010
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA
Provider ID: 100369703002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
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: R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA
Provider ID: 100369703001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

D. Red de proveedores médicos especialistas

HOXMEIER, KRYSTA
Provider ID: 100369703002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
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: R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA
Provider ID: 100369703001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

KIERNAN, ROBERT
Provider ID: 100460519001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA13891
NPI: 1538164702
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

KIERNAN, ROBERT
Provider ID: 100460519001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA13891
NPI: 1538164702
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: P, EB, IB, E, R, T, WC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hours: M-F 8AM-5PM
SA 8AM-12PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

LAMBERT, GAGE
Provider ID: 100337763005
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1144672494
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LAPINA, LORI
Provider ID: 100334962001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LAPINA, LORI
Provider ID: 100334962001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LAPINA, LORI
Provider ID: 100334962003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM
F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LAPINA, LORI
Provider ID: 100334962001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM
F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LAPINA, LORI
Provider ID: 100334962001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 8:30AM-5:30PM
F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LAPINA, LORI
Provider ID: 100334962003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM
F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LEE, JENNIFER
Provider ID: 100439055015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LINDEMANN, CHRISTINA
Provider ID: 100375604003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
Provider ID: 100416646001
Board Certified: 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
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
Provider ID: 100416646001
Board Certified: 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

Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
Provider ID: 100416646002
Board Certified: 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
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
Provider ID: 100416646002
Board Certified: 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
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E
Hours: M-F 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LOPEZ, MARIO
Provider ID: 100141636006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LOPEZ, MARIO
Provider ID: 100141636006
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LOPEZ, MARIO
Provider ID: 100141636005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 100141636005

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 100425219016

Board Certified: 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: WC

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 100060299005

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

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

Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 100060299005

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

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

Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 100147536031

Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERCER, KELLY
Provider ID: 100147536031
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM SA 8AM-2PM
Website: www.lamaestra.org

PHYSICIANS ASSISTANT

MERRILL, COREY
Provider ID: 100352082008
Board Certified: 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: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MILLER, LAUREL
Provider ID: 100111661007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

D. Red de proveedores médicos especialistas

PHYSICIANS ASSISTANT

MILLER, LAUREL

Provider ID: 100111661007

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Provider Gender: Female

License Number: PA20378

NPI: 1598992133

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

MOREO, HUNTER

Provider ID: 100432755011

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MOREO, HUNTER

Provider ID: 100432755009

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NAKAMITSU, ABIGAIL

Provider ID: 100309304003

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

NASSAR, JEANNE
Provider ID: 100136838016
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

NUNO, JOSE
Provider ID: 100338239003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: PA15227
NPI: 1275543068
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

NUNO, JOSE
Provider ID: 100338239003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: PA15227
NPI: 1275543068
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 100006376010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 100006376017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 100375208014
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 100375208011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare .org

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 16\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 100316962008
Board Certified: 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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POGGI, SARA
Provider ID: 100422584016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POGGI, SARA
Provider ID: 100422584015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POLLEY, SHANNON
Provider ID: 100390365002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: PA60864
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F

D. Red de proveedores médicos especialistas

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

PHYSICIANS ASSISTANT

POLLEY, SHANNON
Provider ID: 100390365002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Provider Gender: Female
License Number: PA60864
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

PRIEST, VIVIAN
Provider ID: 100362200003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1225581754
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PRIEST, VIVIAN
Provider ID: 100362200013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PYLE, ALEXANDRA
Provider ID: 100365064005
Board Certified: 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
Hours: M-F 8:30AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 100235071010

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

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: P, EB, IB, E, WC, ME

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 100235071010

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

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: P, EB, IB, E, WC, ME

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

QUIJANO, GLENN

Provider ID: 100390720006

Board Certified: 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

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

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 100341861004

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: PA52141

NPI: 1407855828

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: P, IB, E, T, WC

Website: www.syhealth.org

PHYSICIANS ASSISTANT

RALL, EMILY

D. Red de proveedores médicos especialistas

Provider ID: 100341861004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA52141
NPI: 1407855828
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, IB, E, T, WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

RASMUSSEN, DALE
Provider ID: 100367989003
Board Certified: 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
Provider Gender: Male
License Number: PA54022
NPI: 1962880864
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

RASMUSSEN, DALE
Provider ID: 100367989003
Board Certified: 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
Provider Gender: Male
License Number: PA54022
NPI: 1962880864
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 100353948004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-7777
After Hours Phone: (619) 543-7777
Provider Gender: Female
NPI: 1265960256
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 100416448024
Board Certified: No
RADY CHILDRENS HEALTH

D. Red de proveedores médicos especialistas

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: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 100416448011
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT
Provider ID: 100334226001
Board Certified: 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
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT
Provider ID: 100334226001
Board Certified: 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
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R

D. Red de proveedores médicos especialistas

Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

SCHMITT, EVA
Provider ID: 100108289010
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER
Provider ID: 100138462007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER
Provider ID: 100138462009
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780851253
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER
Provider ID: 100138462024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHULZ, STEFAN
Provider ID: 100317352023
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SERHAN, STEPHANIE
Provider ID: 100444862008
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SERHAN, STEPHANIE
Provider ID: 100444862010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SHAPIRO, RACHEL
Provider ID: 100286001035
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 100091046023

Board Certified: No

IHP OF SOUTHERN CAL-PHP

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 100091046023

Board Certified: No

IHP OF SOUTHERN CAL-PHP

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

PHYSICIANS ASSISTANT

SMITH, TREVOR

Provider ID: 100340580020

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

Provider ID: 100054484006

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA

Provider ID: 100058009012

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 100058009023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 100058009015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 100444836009
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 100444836012
Board Certified: 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
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TREUNER, JULIE

Provider ID: 100334311001

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA17478

NPI: 1922013614

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: P, EB, IB, E, WC, ME

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TREUNER, JULIE

Provider ID: 100334311001

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA17478

NPI: 1922013614

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: P, EB, IB, E, WC, ME

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 100084999007

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

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: P, EB, IB, E, WC, ME

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 100084999007

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

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: P, EB, IB, E, WC, ME

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

Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 100084999007

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

D. Red de proveedores médicos especialistas

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

UDOH, EKAETE
Provider ID: 100356892007
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: PA19664
NPI: 1841472776
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

PHYSICIANS ASSISTANT

UDOH, EKAETE
Provider ID: 100356892007
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: PA19664
NPI: 1841472776
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: www.operationsamahan.org

PHYSICIANS ASSISTANT

VARGAS, ROBERT
Provider ID: 100334129002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: PA11194
NPI: 1972528081
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

VARGAS, ROBERT
Provider ID: 100334129002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: PA11194
NPI: 1972528081

D. Red de proveedores médicos especialistas

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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 100317902033
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 100317902027
Board Certified: 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
Provider English Spoken: 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

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 100317902035
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEBB, SHANNON
Provider ID: 100044999011
Board Certified: 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

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 100147024023
Board Certified: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932494499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 100147024018
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 100147024013
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI
Provider ID: 100334756001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (619) 563-0250
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI
Provider ID: 100334756001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
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: WC
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: www.sdfamilycare.org

PODIATRIST

JUAREZ, LETICIA
Provider ID: 100370317003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PODIATRIST

JUAREZ, LETICIA
Provider ID: 100370317003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA

D. Red de proveedores médicos especialistas

Provider ID: 100393939007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA

Provider ID: 100393939007
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA

Provider ID: 100393939010
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA

Provider ID: 100393939008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)

515-2560
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA
Provider ID: 100393939008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

LE, DIANA
Provider ID: 100393939010
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431027
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431027
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PODIATRIST

PANEK, JOHN
Provider ID: 100440874005
Board Certified: 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: Male
NPI: 1295795599
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

PANEK, JOHN
Provider ID: 100440874004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
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: Male
NPI: 1295795599
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

PANEK, JOHN
Provider ID: 100440874001
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DPM6016
NPI: 1295795599
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

PODIATRIST

PANEK, JOHN
Provider ID: 100440874001
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Provider Gender: Male
License Number: DPM6016
NPI: 1295795599
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8AM-4:30PM
Website: www.opsam.org

PODIATRIST

SCHNEIDER, SARAH
Provider ID: 100059607010
Board Certified: 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
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

SCHNEIDER, SARAH
Provider ID: 100059607010
Board Certified: 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
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

SCHNEIDER, SARAH
Provider ID: 100059607008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: www.fhcsd.org

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 100059607008
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM
SA 8AM-5PM
Website: www.fhcsd.org

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 100059607009
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM
Website: www.fhcsd.org

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 100059607009
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM
Website: www.fhcsd.org

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA

Provider ID: 100041672004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
Provider ID: 100041672004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
Provider ID: 100041672005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
Provider ID: 100041672004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

GENERAL

HILL, LINDA

Provider ID: 100041672005

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA

Provider ID: 100041672004

Board Certified: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858) 279-0925

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s) Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA

Provider ID: 100223295002

Board Certified: 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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA

Provider ID: 100223295010

Board Certified: No

UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 100223295002
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 100223295002
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 100223295002
Board Certified: 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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 100223295002
Board Certified: 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
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5:30PM
Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 100223295005
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 100223295008
Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

PSYCHOLOGIST

ABERCROMBIE, SHERI
Provider ID: 100389089005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1932292422
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5:30PM SA 8:30AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

D. Red de proveedores médicos especialistas

ABERCROMBIE, SHERI
Provider ID: 100389089003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1932292422
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

BANKS, SARAH
Provider ID: 100335815003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BANKS, SARAH
Provider ID: 100335815006
Board Certified: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BANKS, SARAH
Provider ID: 100335815034
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

PSYCHOLOGIST

BASS, GURGIANA

Provider ID: 100389085005

Board Certified: 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

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: 100389085003

Board Certified: 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: P, EB, IB, E, R, T

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

BRENNER, EINAT

Provider ID: 100465936013

Board Certified: No

UCSD MEDICAL GROUP

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: 1679351274

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 100333532004

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

CLEMENT, LUIS

Provider ID: 100361178004
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FIRESTONE, MICHELLE
Provider ID: 100389093005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FIRESTONE, MICHELLE
Provider ID: 100389093003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FORZANI, CHRISTINA
Provider ID: 100389152003
Board Certified: 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: 18\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN
Provider ID: 100389169005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1376824383
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN
Provider ID: 100389169003
Board Certified: 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: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GOMEZ, JUANITA
Provider ID: 100386833013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

KLUEMPER, NICOLE
Provider ID: 100389118005
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

KLUEMPER, NICOLE
Provider ID: 100389118003
Board Certified: 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
Accessibility: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

D. Red de proveedores médicos especialistas

LANIOUS, OKSANA
Provider ID: 100430504008
Board Certified: 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: 1518233311
Provider English Spoken: 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

PSYCHOLOGIST

MCCULLUM, TIFFANY
Provider ID: 100357628004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

MEIER, EMILY
Provider ID: 100189309015
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

MONTOYA, JESSICA
Provider ID: 100364152003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

NORMAN, MARC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100095412009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

NORMAN, MARC
Provider ID: 100095412007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

ORFF, HENRY
Provider ID: 100362893003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

ORTIZ, MARIA
Provider ID: 100344260005
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

PERRY, WILLIAM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100013464012
Board Certified: No
UCSD MEDICAL GROUP
16918 DOVE CANYON RD STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801811195
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

PERRY, WILLIAM
Provider ID: 100013464010
Board Certified: 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: 1801811195
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

PERRY, WILLIAM
Provider ID: 100013464045
Board Certified: 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: 1801811195
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, 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

PSYCHOLOGIST

PRINCE, RENEE
Provider ID: 100415599003
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

PSYCHOLOGIST

RADOJEVIC, NATASHA
Provider ID: 100318148013
Board Certified: 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
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: 100318148009
Board Certified: 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: P, EB, IB, E, R, T
Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SALO, STEPHANIE
Provider ID: 100434120003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SCHELLINGER, KRISTON
Provider ID: 100267518027
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 246-1979
After Hours Phone: (858) 246-1979
Provider Gender: Female
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

SCHELLINGER, KRISTON
Provider ID: 100267518024
Board Certified: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

SCHELLINGER, KRISTON
Provider ID: 100267518026
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

TARLE, STEPHANIE
Provider ID: 100419661005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

TO, TUAN
Provider ID: 100389054004
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TO, TUAN
Provider ID: 100389054008
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TO, TUAN
Provider ID: 100389054007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TWAMLEY, ELIZABETH
Provider ID: 100192872008
Board Certified: 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
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

VIETEN, CASSANDRA
Provider ID: 100408042006
Board Certified: 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: 1336716992
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

VIETEN, CASSANDRA
Provider ID: 100408042007
Board Certified: 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: 1336716992
Provider English Spoken: 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

PUBLIC HEALTH PREVENTATIVE MEDICINE

SOZANSKI, JESSE
Provider ID: 100261504006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 100405060017
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 100405060016
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

IPA: UCSD Medical Group

PULMONARY DISEASES

CYPRO, ALEXANDER

Provider ID: 100446834008
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

HOGAN, NICHOLAS

Provider ID: 100369183014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 100344510007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 100344510009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LE, HUAN
Provider ID: 100047042017
Board Certified: 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: EB, E, R, WC
Hours: M-W 9AM-5PM
TH 8AM-1PM
F 9AM-6PM
SA 8AM-11AM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PULMONARY DISEASES

LE, HUAN
Provider ID: 100047042011
Board Certified: 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: WC
Hours: M-W 9AM-5PM
TH 8AM-1PM
F 9AM-6PM
SA 8AM-11AM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PULMONARY DISEASES

LI, JINGHONG
Provider ID: 100173744070
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

PEARCE, ALEX
Provider ID: 100405670012
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

VAN NOSTRAND, KERIANN
Provider ID: 100461809019
Board Certified: 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: 1821251406
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

VAN NOSTRAND, KERIANN
Provider ID: 100461809009
Board Certified: 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: 1821251406
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

VAN NOSTRAND, KERIANN
Provider ID: 100461809017
Board Certified: 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: 1821251406
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 100388410016
Board Certified: 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

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 100388410023
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 100009016030
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

STRAKA, CHRISTOPHER
Provider ID: 100361123008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

TRINGALE, KATHRYN
Provider ID: 100419415016
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9730 SUMMERS RIDGE RD STE 101
SAN DIEGO, CA 92121
Phone: (858) 345-2445
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
Provider ID: 100239950046
Board Certified: 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: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
Provider ID: 100239950042
Board Certified: No
IHP OF SOUTHERN CAL-PHP
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: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
Provider ID: 100392620017
Board Certified: No
UCSD MEDICAL GROUP
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, UCSD MEDICAL CTR, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
Provider ID: 100392620020
Board Certified: 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, UCSD MEDICAL CTR, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
Provider ID: 100433036009
Board Certified: No
UCSD MEDICAL GROUP
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, VALLEY CHILDRENS HOSPITAL, 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

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
Provider ID: 100433036012
Board Certified: 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, VALLEY CHILDRENS HOSPITAL, 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

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY
Provider ID: 100359942004
Board Certified: No
UCSD MEDICAL GROUP
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): N
Accessibility: P, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY
Provider ID: 100359942025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BISSET, LOGAN
Provider ID: 100433049014
Board Certified: No
UCSD MEDICAL GROUP
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, VALLEY CHILDRENS HOSPITAL, UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BISSET, LOGAN
Provider ID: 100433049015
Board Certified: 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, VALLEY CHILDRENS HOSPITAL, UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

D. Red de proveedores médicos especialistas

BLACKWELL, CHRISTOPHER
Provider ID: 100445846025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 100445846021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 100445846022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BONE, SAMUEL
Provider ID: 100431848018
Board Certified: No
UCSD MEDICAL GROUP
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, Highland Hospital, 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

RADIOLOGY DIAGNOSTIC

BONE, SAMUEL
Provider ID: 100431848022
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR, Highland Hospital, 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

RADIOLOGY DIAGNOSTIC

BRANCH, CODY
Provider ID: 100375465003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BRANCH, CODY
Provider ID: 100375465028
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BROWN, TERESA
Provider ID: 100430621012
Board Certified: No
UCSD MEDICAL GROUP
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: Highland Hospital, Alameda Hospital, 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

RADIOLOGY DIAGNOSTIC

BROWN, TERESA
Provider ID: 100430621016
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

926-8273
Provider Gender: Female
NPI: 1669492237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Highland Hospital, Alameda Hospital, 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

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE
Provider ID: 100434747018
Board Certified: No
UCSD MEDICAL GROUP
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, ANTELOPE VALLEY HOSP MED CTR, Highland Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE
Provider ID: 100434747020
Board Certified: 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, ANTELOPE VALLEY HOSP MED CTR, Highland Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 100356713014
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 100356713021
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 100356713034
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN
Provider ID: 100374799006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN
Provider ID: 100374799012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN
Provider ID: 100374799063
Board Certified: No

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH
Provider ID: 100415415010
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH
Provider ID: 100415415008
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8863
Fax: (858) 966-7903
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH
Provider ID: 100415415003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA

Provider ID: 100446112025

Board Certified: No

UCSD MEDICAL GROUP

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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA

Provider ID: 100446112021

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA

Provider ID: 100446112022

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN

Provider ID: 100445834025

Board Certified: No

UCSD MEDICAL GROUP

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: 1720540743

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN

Provider ID: 100445834021

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1720540743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 100445834022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 100446028025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 100446028021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 100446028022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 100405558013
Board Certified: No
UCSD MEDICAL GROUP

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 100405558014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 100405558027
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY
Provider ID: 100007540013
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497721724
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital, 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

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY
Provider ID: 100007540017
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN
Provider ID: 100332906004
Board Certified: 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: WC
Hours: SU 12AM-11:59PM M-F 8AM-5PM SA 12AM-11:59PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN
Provider ID: 100332906012
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255457941
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GERST, SCOTT
Provider ID: 100409684008
Board Certified: No
UCSD MEDICAL GROUP
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GERST, SCOTT
Provider ID: 100409684011
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 100442391021
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 100442391022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 100442391023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

D. Red de proveedores médicos especialistas

GRISSOM, MURRAY
Provider ID: 100361287005
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY
Provider ID: 100361287008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY
Provider ID: 100374256004
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992120026
Provider English Spoken: Y
Provider Language(s) Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY
Provider ID: 100374256008
Board Certified: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST
Provider ID: 100010171018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST
Provider ID: 100010171021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 100446035025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 100446035021
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 100446035022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 100215758020
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 100215758021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 100215758028
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1275700999
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles General Medical Center, 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

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 100445948025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 100445948021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 100445948022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN
Provider ID: 100433802016
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 100433802012
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 100433802009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 100374722006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 100374722012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

D. Red de proveedores médicos especialistas

LIM, GARRETT
Provider ID: 100445953025
Board Certified: No
UCSD MEDICAL GROUP
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: 1396233565
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 100445953021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 100445953022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MANDT, TYLER
Provider ID: 100463168030
Board Certified: No
UCSD MEDICAL GROUP
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: 1548793888
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MANDT, TYLER
Provider ID: 100463168026
Board Certified: 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: 1548793888
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MANDT, TYLER
Provider ID: 100463168025
Board Certified: No
UCSD MEDICAL GROUP
4250 1ST AVE
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548793888
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MANDT, TYLER
Provider ID: 100463168027
Board Certified: 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: 1548793888
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 100368313022
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 100368313023
Board Certified: 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 100374877006

Board Certified: No
UCSD MEDICAL GROUP
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: 1871957308
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 100374877012
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (619) 471-9260
After Hours Phone: (619) 471-9260
Provider Gender: Male
NPI: 1871957308
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 100374877044
Board Certified: 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: 1871957308
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO
Provider ID: 100445784025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

D. Red de proveedores médicos especialistas

PANZARINI, BRUNO
Provider ID: 100445784021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO
Provider ID: 100445784022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PARIKH, RUPAL
Provider ID: 100397645012
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (539) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1154770543
Provider English Spoken: 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

RADIOLOGY DIAGNOSTIC

PARIKH, RUPAL
Provider ID: 100397645013
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (539) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1154770543
Provider English Spoken: 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

RADIOLOGY DIAGNOSTIC

PARIKH, RUPAL
Provider ID: 100397645016
Board Certified: No
UCSD MEDICAL GROUP
4250 1ST AVE
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1154770543
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

RADIOLOGY DIAGNOSTIC

PARIKH, RUPAL
Provider ID: 100397645021
Board Certified: 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: 1154770543
Provider English Spoken: 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

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL
Provider ID: 100416732027
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL
Provider ID: 100416732023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL
Provider ID: 100416732024
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER
Provider ID: 100141222030
Board Certified: No
UCSD MEDICAL GROUP
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, UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER
Provider ID: 100141222032
Board Certified: 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 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, UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 100445925025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

D. Red de proveedores médicos especialistas

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM

Provider ID: 100445925021

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM

Provider ID: 100445925022

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN

Provider ID: 100445901025

Board Certified: No

UCSD MEDICAL GROUP

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

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN

Provider ID: 100445901021

Board Certified: 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

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN

Provider ID: 100445901022

Board Certified: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1326542341
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROZELL, JOSEPH
Provider ID: 100393606011
Board Certified: No
UCSD MEDICAL GROUP
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, VALLEY CHILDRENS HOSPITAL, 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

RADIOLOGY DIAGNOSTIC

ROZELL, JOSEPH
Provider ID: 100393606016
Board Certified: 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, VALLEY CHILDRENS HOSPITAL, 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

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 100408738020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 100408738021
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 100408738029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER
Provider ID: 100346717005
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER
Provider ID: 100346717008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM
Provider ID: 100405537019
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM
Provider ID: 100405537020
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 100445947025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 100445947021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 100445947022
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY
Provider ID: 100374872006
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY
Provider ID: 100374872012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 100446088025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 100446088021
Board Certified: 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

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 100446088022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN
Provider ID: 100000933007
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN
Provider ID: 100000933011
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992919666
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, 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

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES
Provider ID: 100422209005
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES
Provider ID: 100422209009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 100330031043
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 100330031045
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (619) 471-9240
After Hours Phone: (619) 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): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 100330031046
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SWEET, JASON
Provider ID: 100425277003
Board Certified: 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: WC
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 100346792010
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 100346792006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 100346792011

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 100346792045

Board Certified: 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

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 100317784018

Board Certified: No

UCSD MEDICAL GROUP

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 100317784034

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 100408860018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 100408860014
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 100239950024
Board Certified: 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: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 100239950026
Board Certified: 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: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL

D. Red de proveedores médicos especialistas

HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 100412064018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 100412064009
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 100412064012
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WELSH, RAYMOND
Provider ID: 100442112011
Board Certified: No
UCSD MEDICAL GROUP
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

D. Red de proveedores médicos especialistas

MEE MEMORIAL HOSP, DESERT REGIONAL MED CTR, HI DESERT MEDICAL CENTER, JOHN F KENNEDY MEMORIAL HOSP, PALMDALE REGIONAL MEDICAL CENTER, PROVIDENCE SAINT JOSEPH MED CTR, RIDGECREST REGIONAL HOSPITAL, RIDGECREST REGIONAL HOSPITAL, UCI HEALTH-FOUNTAIN VALLEY, UCI HEALTH-LAKEWOOD, VENTURA COUNTY MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WELSH, RAYMOND
Provider ID: 100442112016
Board Certified: 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, DESERT REGIONAL MED CTR, HI DESERT MEDICAL CENTER, JOHN F KENNEDY MEMORIAL HOSP, PALMDALE REGIONAL MEDICAL CENTER, PROVIDENCE SAINT JOSEPH MED CTR, RIDGECREST REGIONAL HOSPITAL, RIDGECREST REGIONAL HOSPITAL, UCI HEALTH-FOUNTAIN VALLEY, UCI HEALTH-LAKEWOOD, VENTURA COUNTY MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 100446104025
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 100446104021
Board Certified: 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
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 100446104022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YOO, RAPHAEL
Provider ID: 100438282007
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
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
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

YOO, RAPHAEL
Provider ID: 100438282008
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

ZAMORA, JESUS
Provider ID: 100347655058
Board Certified: No
UCSD MEDICAL GROUP
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: 1457525578
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PROVIDENCE LITTLE CO OF

MARY MED CTR SAN PEDRO, PROVIDENCE LITTLE CO OF MARY MED CTR TORRANCE, REDLANDS COMMUNITY HOSP, UCI HEALTH-LOS ALAMITOS, VALLEY CHILDRENS HOSPITAL, ANTELOPE VALLEY HOSP MED CTR, Highland Hospital, Highland Hospital, Eisenhower Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAMORA, JESUS
Provider ID: 100347655057
Board Certified: 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: 1457525578
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

MARY MED CTR SAN PEDRO, PROVIDENCE LITTLE CO OF MARY MED CTR TORRANCE, REDLANDS COMMUNITY HOSP, UCI HEALTH-LOS ALAMITOS, VALLEY CHILDRENS HOSPITAL, ANTELOPE VALLEY HOSP MED CTR, Highland Hospital, Highland Hospital, Eisenhower Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

CALLAWAY, MALLORY
Provider ID: 100384228002
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477207611
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER
Provider ID: 100043494005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER
Provider ID: 100043494008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

NGUYEN, VUONG
Provider ID: 100459269005
Board Certified: 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: 1316447246
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SHMARIAHU, SHELLY
Provider ID: 100441334002
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE
Provider ID: 100359207005
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1356478929
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 100337172007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 100337172006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BALL, STEPHEN

Provider ID: 100332393021
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN

Provider ID: 100192726005
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1669818993
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN
Provider ID: 100192726007
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 100222781008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT
Provider ID: 100334271001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: PT30272
NPI: 1457689309
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT
Provider ID: 100334271001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300

After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: PT30272
NPI: 1457689309
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

BOEHMER, ALEXANDRA
Provider ID: 100441981006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 100198139029
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 100198139022
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

CAMERON, IAN
Provider ID: 100378325002
Board Certified: No

D. Red de proveedores médicos especialistas

FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT291088
NPI: 1275993560
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

CAMERON, IAN
Provider ID: 100378325002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT291088
NPI: 1275993560
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

CORTEZ, AARON
Provider ID: 100321688008
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

COSTELLO, MARK
Provider ID: 100082276053
Board Certified: 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: WC
Website: N/A
IPA: IHP of Southern Cal-PHP

D. Red de proveedores médicos especialistas

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 100378318003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 100378318003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

DANG, ERIC

Provider ID: 100329333006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

DANG, KAYLEE

Provider ID: 100367637004
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1316426356
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH
Provider ID: 100280578066
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH
Provider ID: 100280578066
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

JOHNSON, KENNADY
Provider ID: 100391311026
Board Certified: 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 MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

LEE, RYANT
Provider ID: 100439601002
Board Certified: 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
Provider Gender: Male
License Number: PT296601
NPI: 1659922177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

LEE, RYANT
Provider ID: 100439601002
Board Certified: 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
Provider Gender: Male
License Number: PT296601
NPI: 1659922177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER
Provider ID: 100306264010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER
Provider ID: 100306264012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
Provider ID: 100341263005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male

D. Red de proveedores médicos especialistas

License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
Provider ID: 100341263005
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

NGUYEN, HARRY
Provider ID: 100338450006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RICKERTS, MATTHEW
Provider ID: 100254726005
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER
Provider ID: 100339447006
Board Certified: 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

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

SALES, JAN ERIC
Provider ID: 100406498002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: PT303890
NPI: 1417650169
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

SALES, JAN ERIC
Provider ID: 100406498002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Female
License Number: PT303890
NPI: 1417650169
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN
Provider ID: 100017414004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT28061
NPI: 1780685032
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN
Provider ID: 100017414004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT28061
NPI: 1780685032
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE
Provider ID: 100166713009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

TAM, JODI
Provider ID: 100220488006
Board Certified: 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: 1487057527
Provider English Spoken: Y
Provider Language(s) Spoken: Yue Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

TOPALOVIC, HANNAH
Provider ID: 100411605006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
Provider ID: 100334313003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE

D. Red de proveedores médicos especialistas

SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
Provider ID: 100334313003
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
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: WC
Hours: M-TH 8AM-9PM F 8AM-5PM
Website: www.fhcsd.org

REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY
Provider ID: 100361518006
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN
Provider ID: 100337116022
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 100316344006

Board Certified: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 535-6422

After Hours Phone: (855) 543-0333

Provider Gender: Female

NPI: 1720489503

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 100146888013

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 100146888012

Board Certified: No

UCSD MEDICAL GROUP

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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RHEUMATOLOGY

REDDY, DANA

Provider ID: 100140462043

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

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,

D. Red de proveedores médicos especialistas

SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

RHEUMATOLOGY

REDDY, DANA
Provider ID: 100140462043
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

RHEUMATOLOGY

REDDY, DANA
Provider ID: 100140462055
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8AM-5:30PM
Website: N/A

RHEUMATOLOGY

REDDY, DANA
Provider ID: 100140462055
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Provider Gender: Female
License Number: A115598
NPI: 1144538778
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: EB, IB, E
Hours: M-F 8AM-5:30PM
Website: N/A

SLEEP MEDICINE

FINCH, CHRISTINA
Provider ID: 100407566011
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-7283
Fax: (888) 539-8781
After Hours Phone: (800) 926-7283
Provider Gender: Female
NPI: 1598255325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SLEEP MEDICINE

FINCH, CHRISTINA
Provider ID: 100407566012
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1598255325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 100401867010
Board Certified: 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
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 100401867011
Board Certified: 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
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 100401867015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
8929 AERO DR STE E
SAN DIEGO, CA 92123
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1073873501
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

MILLER, WILLIAM
Provider ID: 100415096001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: SP35150
NPI: 1972002210
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

SPEECH PATHOLOGIST

MILLER, WILLIAM
Provider ID: 100415096001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Male
License Number: SP35150
NPI: 1972002210
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: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN
Provider ID: 100386671004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

UNGER, LINDSEY
Provider ID: 100339243003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

WILLIAMS, JESSICA
Provider ID: 100337935001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: SP27677
NPI: 1932680006
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

SPEECH PATHOLOGIST

WILLIAMS, JESSICA
Provider ID: 100337935001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
License Number: SP27677
NPI: 1932680006
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC, ME
Hours: M-F 8AM-5:30PM SA 8AM-5PM
Website: www.fhcsd.org

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

D. Red de proveedores médicos especialistas

Provider ID: 100214602015
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL
Provider ID: 100214602011
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1194983932
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL
Provider ID: 100214602012
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI
Provider ID: 100363220003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI
Provider ID: 100363220030

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE
Provider ID: 100320727009
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518163005
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE
Provider ID: 100320727012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 100225610021
Board Certified: 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
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 100225610016
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA
Provider ID: 100082727009
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA
Provider ID: 100082727036
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA
Provider ID: 100376974004
Board Certified: No
UCSD MEDICAL GROUP
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):

D. Red de proveedores médicos especialistas

N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

LIEPERT, AMY
Provider ID: 100350624006
Board Certified: No
UCSD MEDICAL GROUP
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: 1366611972
Provider English Spoken: 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

SURGERY CRITICAL CARE

POTENZA, BRUCE
Provider ID: 100036785010
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE
Provider ID: 100376993004
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA
Provider ID: 100299589016
Board Certified: No
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

BARNES, RYAN
Provider ID: 100216748006
Board Certified: 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
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: 100216748008
Board Certified: 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
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: 100142659006
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
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

D. Red de proveedores médicos especialistas

Provider ID: 100142659008
Board Certified: 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
Provider Language(s) Spoken: Spanish
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
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: 100166989017
Board Certified: 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: P, EB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 100346686010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 100346686006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 100416078012
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 100416078011
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

FAIRBANKS, TIMOTHY

D. Red de proveedores médicos especialistas

Provider ID: 100135959028
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

GARCIA CABRERA, ANA
Provider ID: 100442349005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HOLLANDSWORTH, HANNAH
Provider ID: 100441332006
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HOLLANDSWORTH, HANNAH
Provider ID: 100441332013
Board Certified: 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 CTR
Medi-Cal Open Panel: Yes

D. Red de proveedores médicos especialistas

Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

IGNACIO, ROMEO
Provider ID: 100343556003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 100051550016
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 100051550009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 100051550018
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1265649966
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 100051550058
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

REEVES, JAMES
Provider ID: 100442356008
Board Certified: 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: 1174059257
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

REEVES, JAMES
Provider ID: 100442356005
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANDLER, BRYAN
Provider ID: 100033907010
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANDLER, BRYAN
Provider ID: 100033907013
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANTORELLI, JARRETT
Provider ID: 100362047003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

WAKAM, GLENN
Provider ID: 100473413003
Board Certified: 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: 1972952422
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

YELON, JAY
Provider ID: 100450758005
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY HAND

CAGE, DORI
Provider ID: 100014833005
Board Certified: 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: P, EB, E, R, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL
Provider ID: 100377441004
Board Certified: No
UCSD MEDICAL GROUP
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
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 100333991023
Board Certified: 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, HOAG HOSPITAL IRVINE, 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
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
Provider ID: 100330164019
Board Certified: No
UCSD MEDICAL GROUP
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, TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN
Provider ID: 100454448015
Board Certified: 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: 1487107454
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

LEVY, MICHAEL
Provider ID: 100079062012
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE
Provider ID: 100010996012
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH
Provider ID: 100348282009
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR

D. Red de proveedores médicos especialistas

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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH
Provider ID: 100348282032
Board Certified: 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: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN
Provider ID: 100332790011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

TOMLIN, JEFFREY
Provider ID: 100362822003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

U, HOI
Provider ID: 100009655008

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN
Provider ID: 100446080015
Board Certified: No
UCSD MEDICAL GROUP
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: 1902369366
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER
Provider ID: 100347797003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUKATA, SUSAN
Provider ID: 100169604019
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUKATA, SUSAN
Provider ID: 100169604039
Board Certified: No
UCSD MEDICAL GROUP

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHENG, YU-TSUN
Provider ID: 100046358020
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1992982854
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK
Provider ID: 100350327023
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHOI, JIHOON
Provider ID: 100377335010
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

D. Red de proveedores médicos especialistas

SURGERY ORTHOPEDIC

CIDAMBI, EMILY
Provider ID: 100351572021
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CIDAMBI, EMILY
Provider ID: 100351572005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
NPI: 1659634699
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 100445888015
Board Certified: No
UCSD MEDICAL GROUP
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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DIJANIC, CHRISTOPHER
Provider ID: 100445828015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DWIGHT, KATHRYN
Provider ID: 100454340015
Board Certified: No

D. Red de proveedores médicos especialistas

UCSD MEDICAL GROUP
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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

EDMONDS, ERIC
Provider ID: 100112637030
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1013048412
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

EDMONDS, ERIC
Provider ID: 100112637026
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1013048412
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

GEORGE, JOSE
Provider ID: 100446008015
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK
Provider ID: 100377339010
Board Certified: No
UCSD MEDICAL GROUP
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

HURVITZ, ANDREW
Provider ID: 100442456017
Board Certified: No
UCSD MEDICAL GROUP
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: 1083842371
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

HURVITZ, ANDREW
Provider ID: 100442456018
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

JACKSON, MADELEINE
Provider ID: 100413800003
Board Certified: 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
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

D. Red de proveedores médicos especialistas

SURGERY ORTHOPEDIC

KWON, MICHAEL

Provider ID: 100457589003
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Male
NPI: 1548477631
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

MITCHELL, JOSEPH

Provider ID: 100361146018
Board Certified: 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: 1699161471
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, 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

SURGERY ORTHOPEDIC

MITCHELL, JOSEPH

Provider ID: 100361146009
Board Certified: No
UCSD MEDICAL GROUP
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: 1699161471
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

MITCHELL, JOSEPH

Provider ID: 100361146017
Board Certified: No
UCSD MEDICAL GROUP
4250 1ST AVE
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699161471
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
Provider ID: 100445865015
Board Certified: No
UCSD MEDICAL GROUP
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SEDGHI, SOUDABEH
Provider ID: 100445840015
Board Certified: No
UCSD MEDICAL GROUP
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
Hospital Affiliation: CHILDRENS HOSPITAL AT MISSION
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

SURGERY PEDIATRIC

BICKLER, STEPHEN
Provider ID: 100063065006
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

GOSMAN, AMANDA
Provider ID: 100032645015
Board Certified: 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,

D. Red de proveedores médicos especialistas

UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KELLER, BENJAMIN
Provider ID: 100361923007
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1285953364
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KELLER, BENJAMIN
Provider ID: 100361923003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 100043066034
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 100043066025

Board Certified: 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, 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: P, EB, IB, E, R, T, WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 100281871008

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 100281871005

Board Certified: 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: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 100256000013

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-7711

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN
Provider ID: 100256000005
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1598979593
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 100441948007
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PLASTIC

HINCHCLIFF, KATHARINE
Provider ID: 100366951031
Board Certified: 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: 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
Website: N/A
IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 100366951003
Board Certified: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346674561
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 100366951011
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 100351374050
Board Certified: 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: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 100351374018
Board Certified: 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
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 100351374009
Board Certified: No
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
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 100351374007
Board Certified: 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: WC
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 100351374015
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

LEWIS, PRIYA
Provider ID: 100416547003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 100441526021
Board Certified: No
UCSD MEDICAL GROUP
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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 100441526022
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 100441526020
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 100441526014
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 100441526015
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 100441526025
Board Certified: 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
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

XUE, JAY
Provider ID: 100412001005
Board Certified: No
UCSD MEDICAL GROUP
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: 1578097127
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

FOX, KENNETH
Provider ID: 100356523003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

GANTA, SRUJAN
Provider ID: 100355527003
Board Certified: 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: WC
Hours: SU 12AM-11:59PM
M-F 8AM-5PM
SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY THORACIC

GANTA, SRUJAN
Provider ID: 100355527006
Board Certified: 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: WC
Hours: SU 12AM-11:59PM
M-F 8AM-5PM
SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY THORACIC

D. Red de proveedores médicos especialistas

LEWIS, MICHAEL
Provider ID: 100401817003
Board Certified: 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
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

NIGRO, JOHN
Provider ID: 100312580005
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 202
SAN DIEGO, CA 92123
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Male
NPI: 1881707818
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

VOSSLER, JOHN
Provider ID: 100430518003
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

UROLOGY

BAGRODIA, ADITYA
Provider ID: 100379858011
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

UROLOGY

BECHIS, SETH
Provider ID: 100334868013
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

UROLOGY

CHEN, TONY
Provider ID: 100375931004
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

KADER, ANDREW
Provider ID: 100141779017
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 100355781007
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 100355781029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 100355781003
Board Certified: No
UCSD MEDICAL GROUP
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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 100355781025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

UROLOGY

PATEL, DEVIN
Provider ID: 100351242003
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

SANTIAGO-LASTRA, YAHIR
Provider ID: 100324765029
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

UROLOGY

SANTIAGO-LASTRA, YAHIR
Provider ID: 100324765024
Board Certified: 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
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
Website: N/A
IPA: UCSD Medical Group

UROLOGY

SWORDS, KELLY
Provider ID: 100246641005
Board Certified: 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): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

UROLOGY

UNTERBERG, STEPHEN

D. Red de proveedores médicos especialistas

Provider ID: 100365260027
Board Certified: Yes
IHP OF SOUTHERN CAL-PHP
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Male
NPI: 1215374210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 100365260015
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 100365260016
Board Certified: No
COMMUNITY CARE IPA LLC
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858) 485-0554
Provider Gender: Male
NPI: 1215374210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 100365260028
Board Certified: 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

D. Red de proveedores médicos especialistas

CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

WOO, JASON
Provider ID: 100240396025
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

SAN MARCOS

CARDIOVASCULAR DISEASE

JAIN, NIKHIL
Provider ID: 100471200008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
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: 1376049114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

BAKER, SHANNON
Provider ID: 100369872005
Board Certified: 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
Provider Gender: Female
License Number: NP95016279
NPI: 1518191014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CABRAL, ALEJANDRA
Provider ID: 100294242005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH

D. Red de proveedores médicos especialistas

Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
Provider ID: 100404327003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FLORES, BERTHA
Provider ID: 100449788003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1942032602
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No

D. Red de proveedores médicos especialistas

IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
Provider ID: 100274803005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

HAN, ANGELA
Provider ID: 100338964007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1629242839
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: JOHN MUIR MEDICAL CENTER WALNUT CREEK CAMPUS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IORIO, ALANNA
Provider ID: 100449961009
Board Certified: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Phone: (760) 748-8935
Fax: (760) 747-7951
After Hours Phone: (760) 748-8935
Provider Gender: Female
NPI: 1295556256
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

JACKSON, MARILYN
Provider ID: 100318412031
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2085 MONTIEL RD STE 102

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

SAN MARCOS, CA 92069
Phone: (833) 867-4642
Fax: (360) 462-5827
After Hours Phone: (833) 867-4642
Provider Gender: Female
NPI: 1699847913
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
Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KOHOUT, KATHRYN
Provider ID: 100389926002
Board Certified: 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
Hours: M-F 8AM-8PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 100229997030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 100229997030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R,

D. Red de proveedores médicos especialistas

T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 100229997030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 100229997030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 100229997030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 100229997030
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MOONEY, PATRICIA
Provider ID: 100368996022
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95018633
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95018633
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD

D. Red de proveedores médicos especialistas

SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95018633
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517004
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95018633
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: NP95018633
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 100441517005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

736-6767
Provider Gender: Male
License Number: NP95018633
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED NURSE PRACTITIONER

NGUYEN, VANESSA
Provider ID: 100418792003
Board Certified: 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
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PARSONS, MEKRAE
Provider ID: 100334122005
Board Certified: 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: 1972090306
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 100340378003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

CHIROPRACTOR

MOJICA, MARIO
Provider ID: 100087341019
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: DC27130
NPI: 1801962477
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

DERMATOLOGY

BROWN, REGINA
Provider ID: 100436783018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

WITCZAK, IZABELA
Provider ID: 100036527008
Board Certified: 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: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 100344561009
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

ANDER, AZIZ
Provider ID: 100169155020
Board Certified: No
IHP OF SOUTHERN CAL-PHP
838 NORDAHL RD STE 310
SAN MARCOS, CA 92069
Phone: (442) 999-5977
Fax: (442) 999-5914
After Hours Phone: (442) 999-5977
Provider Gender: Male
NPI: 1316131832
Provider English Spoken: Y
Provider Language(s) Spoken: Faroese, Pashto, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

GUPTA, MONIKA
Provider ID: 100195257045
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS
Provider ID: 100196834022
Board Certified: 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, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, MAYERS MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM
Provider ID: 100391342016
Board Certified: 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
Hours: M-F 8AM-6PM SA 9AM-12:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE
Provider ID: 100330735044
Board Certified: No
IHP OF SOUTHERN CAL-PHP
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Phone: (760) 281-3662
Fax: (760) 316-5268
After Hours Phone: (760) 281-3662
Provider Gender: Male
NPI: 1225474034
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
Provider ID: 100149393016
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

LUM HO, RACHEL
Provider ID: 100361921007

Board Certified: 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
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: 100361921008
Board Certified: 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
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: 100070552006
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-6PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

PEDIATRICS

QUINTERO, CAROLYN
Provider ID: 100063462012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1023033156
Provider English Spoken: Y
Provider Language(s) Spoken: Afar, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\18
American Sign Language (ASL): N
Hours: M-F 8AM-6PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 100240118025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 100240118025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 100240118025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 100240118025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 100240118025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 100240118025
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100347875011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22133
NPI: 1144594367
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100347875011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22133
NPI: 1144594367
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: P, EB, IB, E, R,

D. Red de proveedores médicos especialistas

T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100405465002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1457903700
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
Hours: M-F 8AM-8PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100347875011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22133
NPI: 1144594367
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100347875011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22133
NPI: 1144594367
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100347875011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22133
NPI: 1144594367
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 100347875011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA22133
NPI: 1144594367
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):

D. Red de proveedores médicos especialistas

N

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

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 100347875011

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Female

License Number: PA22133

NPI: 1144594367

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

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

JUACHE, GABRIELA

Provider ID: 100370878005

Board Certified: 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: 1043830763

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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

D. Red de proveedores médicos especialistas

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 100054480006

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Provider Gender: Male

License Number: PA17101

NPI: 1316947302

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937003

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
  SA 8AM-5PM
- *Website: www.ihpsocal.org*

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*

Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
  SA 8AM-5PM
- *Website: www.ihpsocal.org*

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*

Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
  SA 8AM-5PM
- *Website: www.ihpsocal.org*

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*

Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
  SA 8AM-5PM
- *Website: www.ihpsocal.org*

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*

Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC*
- *Hours: M-F 8AM-5PM*
  SA 8AM-5PM
- *Website: www.ihpsocal.org*

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100417937003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62228
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

Provider ID: 100417937002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 100390365004
Board Certified: 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: 1225608722
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-2PM SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider ID: 100334980001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RUSSO, KRISTA
Provider ID: 100334980001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RUSSO, KRISTA
Provider ID: 100334980001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RUSSO, KRISTA
Provider ID: 100334980001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RUSSO, KRISTA
Provider ID: 100334980001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

RUSSO, KRISTA
Provider ID: 100334980001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62883
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
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
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Provider Gender: Female
License Number: PA62883
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
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
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62883
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
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
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62883
NPI: 1649906108

D. Red de proveedores médicos especialistas

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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62883
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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
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
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 100417216006
Board Certified: 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
Provider Gender: Female
License Number: PA62883
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
Hours: M-F 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SPENCE, JAMIE
Provider ID: 100334759004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SPENCE, JAMIE
Provider ID: 100334759004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SPENCE, JAMIE
Provider ID: 100334759004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SPENCE, JAMIE
Provider ID: 100334759004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SPENCE, JAMIE
Provider ID: 100334759004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

SPENCE, JAMIE
Provider ID: 100334759004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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: P, EB, IB, E, R, T, WC
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D. Red de proveedores médicos especialistas

Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
Provider ID: 100333909003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: www.ihpsocal.org

PSYCHOLOGIST

FLYNN, DANIELLE
Provider ID: 100341221005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1477785137
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Website: N/A
IPA: IHP of Southern Cal-PHP

SAN YSIDRO

ALLERGY IMMUNOLOGY

REDDY, SUMANA
Provider ID: 100133573040
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: C52581
NPI: 1053300251
Provider English Spoken: Y
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

ALLERGY IMMUNOLOGY

REDDY, SUMANA
Provider ID: 100133573040
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: C52581
NPI: 1053300251
Provider English Spoken: Y
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CARDIOVASCULAR DISEASE

PONCE, SONIA
Provider ID: 100326954021
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CARDIOVASCULAR DISEASE

PONCE, SONIA
Provider ID: 100326954021
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

CHAUSSE CASTRO, EKATERINA
Provider ID: 100399961001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

CHAUSSE CASTRO, EKATERINA
Provider ID: 100399961001
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)

D. Red de proveedores médicos especialistas

662-4100
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA
Provider ID: 100331385006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
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: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA
Provider ID: 100331385006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
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: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO
Provider ID: 100340085002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174
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: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO
Provider ID: 100340085002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO
Provider ID: 100344698009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO
Provider ID: 100344698009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 100324677012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 100324677012
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS
Provider ID: 100323610009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS
Provider ID: 100323610009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
Provider ID: 100379614006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
Provider ID: 100379614006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95017732

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
Provider ID: 100342576002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
Provider ID: 100342576005
Board Certified: 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
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
Provider ID: 100342576005
Board Certified: 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
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
Provider ID: 100342576002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA
Provider ID: 100334538003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
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: WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA
Provider ID: 100334538003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
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: WC
Website: www.syhealth.org

CHIROPRACTOR

OCHOA, RAUL
Provider ID: 100334411002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
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: WC
Website: www.syhealth.org

CHIROPRACTOR

OCHOA, RAUL
Provider ID: 100334411002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
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: WC
Website: www.syhealth.org

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
Provider ID: 100354616008

Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
Provider ID: 100354616008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

FAMILY PRACTICE

ARRIETA, NOEMI
Provider ID: 100214881012
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

CHOU, SUSANNA
Provider ID: 100054762011
Board Certified: 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: 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

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

DALUGDUGAN, ESTHER
Provider ID: 100417489003
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

GOLU, CRISTIANA
Provider ID: 100335698018
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ORTEGA, LUIS
Provider ID: 100394387005
Board Certified: 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
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

QURESHI, SOFIA
Provider ID: 100434189003
Board Certified: 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: 1902197544
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

D. Red de proveedores médicos especialistas

FAMILY PRACTICE

SEO, CHANMEE

Provider ID: 100438913007

Board Certified: 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: 1336717206

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL): N

Accessibility: WC

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE GERIATRIC MEDICINE

BULOW, KWI

Provider ID: 100035891070

Board Certified: 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

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

Website: N/A

IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 100134749020

Board Certified: 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

Website: N/A

IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

POLESKY, ANDREA

Provider ID: 100084365006

Board Certified: 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

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 100357070005

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.syhealth.org

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 100357070005

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

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

Website: www.syhealth.org

INTERNAL MEDICINE

NASONGKLA, CHATRATHIP

Provider ID: 100468843002

Board Certified: 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: 1639799760

Provider English Spoken: Y

Provider Language(s) Spoken: Thai

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\99

American Sign Language (ASL): N

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 100009399008

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619) 662-4100

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
Provider ID: 100009399008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Provider Gender: Male
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
Provider ID: 100075572021
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

DINH, MY
Provider ID: 100331393008
Board Certified: 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
American Sign Language (ASL): N
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
Provider ID: 100394456009
Board Certified: 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): N
Hours: M-F 8AM-8PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
Provider ID: 100394456010
Board Certified: 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
Hours: M-F 8AM-8PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

KOBAYASHI, KAREN
Provider ID: 100039829020
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

D. Red de proveedores médicos especialistas

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO
Provider ID: 100337420018
Board Certified: 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: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OCCUPATIONAL THERAPIST

TORRES, ELSA-LUCIA
Provider ID: 100410619003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: OT23690
NPI: 1710624986
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

OCCUPATIONAL THERAPIST

TORRES, ELSA-LUCIA
Provider ID: 100410619003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: OT23690
NPI: 1710624986
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160022
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

OPHTHALMOLOGY

SKAF, AYHAM
Provider ID: 100165160022

D. Red de proveedores médicos especialistas

Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PEDIATRICS

DOKICH, SRETENKA
Provider ID: 100113183014
Board Certified: 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
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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

FUJII, CINDY
Provider ID: 100341421004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1871664821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
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: 100354595006
Board Certified: 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
Hours: SU 10AM-4PM
M 8:30AM-8PM
W-F 8:30AM-5:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH
Provider ID: 100363024006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA18363
NPI: 1215909205
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH
Provider ID: 100363024006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA18363
NPI: 1215909205
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616014
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 100084616014
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

KAMOTO, LYNN
Provider ID: 100197328008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173

D. Red de proveedores médicos especialistas

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
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: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

KAMOTO, LYNN
Provider ID: 100197328008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
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: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE
Provider ID: 100344265004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA16269
NPI: 1053403782
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE
Provider ID: 100344265004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA16269
NPI: 1053403782
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

ROSS, COLLIN
Provider ID: 100165857004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16058
NPI: 1629182050
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):

D. Red de proveedores médicos especialistas

N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

ROSS, COLLIN
Provider ID: 100165857004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA16058
NPI: 1629182050
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: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

SMITH, DOUGLAS
Provider ID: 100368749003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA12304
NPI: 1902016611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

SMITH, DOUGLAS
Provider ID: 100368749003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA12304
NPI: 1902016611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN
Provider ID: 100340691004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: PA22855
NPI: 1497196729
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN
Provider ID: 100340691004
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

License Number: PA22855
NPI: 1497196729
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

THOMAS, KIMBERLY
Provider ID: 100434772005
Board Certified: 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
License Number: PA16768
NPI: 1396052007
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

THOMAS, KIMBERLY
Provider ID: 100434772005
Board Certified: 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
License Number: PA16768
NPI: 1396052007
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-8PM
SA 8AM-2PM
Website: www.syhealth.org

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL
Provider ID: 100341601007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
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: WC
Website: www.syhealth.org

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL
Provider ID: 100341601007
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

N
Accessibility: WC
Website: www.syhealth.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Provider Gender: Male
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431003
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Provider Gender: Male
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PODIATRIST

MANCHEL, BRUCE
Provider ID: 100041431013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

D. Red de proveedores médicos especialistas

CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Website: www.syhealth.org

PSYCHOLOGIST

IBANEZ, BERENICE
Provider ID: 100112346007
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN
Provider ID: 100385779002
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

LWIN, THUTHIRI
Provider ID: 100415518004
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SANTEE

CERTIFIED NURSE PRACTITIONER

THYGERSEN, ALAYSA
Provider ID: 100404447011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95022809
NPI: 1760107767
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

THYGERSEN, ALAYSA
Provider ID: 100404447011
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
License Number: NP95022809
NPI: 1760107767
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 100333696008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 445-6687
After Hours Phone: (619) 445-6687
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
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: P, EB, IB, E, WC
Hours: M 10:30AM-11:45AM
Website: www.syhealth.org

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
Provider ID: 100333696008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 445-6687
After Hours Phone: (619) 445-6687
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
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: P, EB, IB, E, WC
Hours: M 10:30AM-11:45AM
Website: www.syhealth.org

CHIROPRACTOR

KELCHNER, MATTHEW
Provider ID: 100065809009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D. Red de proveedores médicos especialistas

N
Accessibility: P, EB, IB, E, WC
Hours: M 10:30AM-11:45AM
Website: www.syhealth.org

CHIROPRACTOR

KELCHNER, MATTHEW
Provider ID: 100065809009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, WC
Hours: M 10:30AM-11:45AM
Website: www.syhealth.org

PEDIATRICS

IKE, ERICA
Provider ID: 100343272013
Board Certified: 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: P, EB, IB, E, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY
Provider ID: 100334265004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY
Provider ID: 100334265004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
Provider English Spoken: Y

D. Red de proveedores médicos especialistas

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
Provider ID: 100391830004
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LOPEZ, MARIO
Provider ID: 100141636002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

LOPEZ, MARIO
Provider ID: 100141636002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TRAN, TU-UYEN
Provider ID: 100367614001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TRAN, TU-UYEN
Provider ID: 100367614001
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
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: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, ERIC
Provider ID: 100334031002
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

PHYSICIANS ASSISTANT

TURNER, ERIC
Provider ID: 100334031002
Board Certified: No

D. Red de proveedores médicos especialistas

FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M-F 8:30AM-5:30PM
Website: www.fhcsd.org

TEMECULA

CERTIFIED NURSE PRACTITIONER

MIRACLE, ANGELYN
Provider ID: 100145652008
Board Certified: 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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL VASCULAR

HOWE, STEVEN
Provider ID: 100221170011
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

VALLEY CENTER

CERTIFIED NURSE PRACTITIONER

HOULE, STEPHANIE
Provider ID: 100449719003
Board Certified: 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):

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

GUPTA, ANUJ
Provider ID: 100045716008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2023 W VISTA WAY STE D
VISTA, CA 92083
Phone: (619) 330-8771
Fax: (619) 330-8772
After Hours Phone: (619) 330-8771
Provider Gender: Male
NPI: 1073629549
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR, PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

JAIN, NIKHIL
Provider ID: 100471200012
Board Certified: 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: 1376049114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: WC
Hours: TH 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

GALLO, PHILIP
Provider ID: 100210926008
Board Certified: 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
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\65
American Sign Language (ASL): N
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: 100210926010
Board Certified: 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
Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\65
American Sign Language (ASL): N
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: 100204222005
Board Certified: 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
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: 100418239003
Board Certified: 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
Hours: M-F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN
Provider ID: 100418239002
Board Certified: 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
Hours: M-F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BJORNSON, MICHELE
Provider ID: 100233983013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95001884
NPI: 1952792780

D. Red de proveedores médicos especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

BJORNSON, MICHELE
Provider ID: 100233983013
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95001884
NPI: 1952792780
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA
Provider ID: 100260819010
Board Certified: 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
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TU 8:30AM-5PM
TH-F 8:30AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

CHIRIBOGA, MEGAN
Provider ID: 100398353015
Board Certified: No
IHP OF SOUTHERN CAL-PHP
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

D. Red de proveedores médicos especialistas

Provider Gender: Female
License Number: NP95020845
NPI: 1942931589
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TU 8:30AM-5PM TH-F 8:30AM-5PM
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE
Provider ID: 100448240003
Board Certified: 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: 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
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: 100448240005
Board Certified: 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
American Sign Language (ASL): N
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: 100448240007
Board Certified: 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: 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
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: 100448240009
Board Certified: No
COMMUNITY CARE IPA LLC

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GUIDI, CASEY
Provider ID: 100399317006
Board Certified: 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
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 NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621003
Board Certified: 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
Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
Provider ID: 100324621008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95006826
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: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM
Website: www.vistacommu

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

nityclinic.org

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 100324621008

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95006826

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 100345409014

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95003447

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 100345409014

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

License Number: NP95003447

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: P, EB, IB, E, R, T, WC, ME

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

Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 100345409029

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409041
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 100345409027
Board Certified: 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
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
Provider ID: 100358241015
Board Certified: 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: 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
Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA
Provider ID: 100021363017

D. Red de proveedores médicos especialistas

Board Certified: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093895047
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MCCARTHY, SARAH
Provider ID: 100358757004
Board Certified: 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: 1063958700
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NICHOLAS, ESTELA
Provider ID: 100188958004
Board Certified: 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): N
Accessibility: WC
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: 100237811012
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N

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

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM

Provider ID: 100452383007

Board Certified: 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: Female

NPI: 1346079910

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

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: 100452383009

Board Certified: 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: 1346079910

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

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: 100452383003

Board Certified: 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: Female

NPI: 1346079910

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

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: 100452383005

Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

NPI: 1346079910
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
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: 100005508015
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WILLIAMS, JINA
Provider ID: 100393483008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020624
NPI: 1225500259
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Website: www.vistacommunityclinic.org

CERTIFIED NURSE PRACTITIONER

WILLIAMS, JINA
Provider ID: 100393483008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: NP95020624
NPI: 1225500259
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Website: www.vistacommunityclinic.org

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY
Provider ID: 100399317005
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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
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: 100331223010
Board Certified: 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: 1508195348
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CHIROPRACTOR

CORTEZ, JAIME
Provider ID: 100331223008
Board Certified: 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: P, EB, IB, E, R, T, WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CHIROPRACTOR

JU, NATHANIEL
Provider ID: 100343058008
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Male
License Number: DC32054
NPI: 1972883882
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM
Website: www.vistacommunityclinic.org

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 100343058008

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

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

Website: www.vistacommunityclinic.org

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

Provider ID: 100464747035

Board Certified: No

IHP OF SOUTHERN CAL-PHP

950 CIVIC CENTER DR STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

Provider ID: 100464747036

Board Certified: 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: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: WC

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

Provider ID: 100464747031

Board Certified: No

IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1457939043

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN

Provider ID: 100464747032

Board Certified: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

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: Male
NPI: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMATIPOUR, ASHKAN
Provider ID: 100464747022
Board Certified: 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: 1457939043
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-8PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 100001887048
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 100245868035
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DAO, MARC
Provider ID: 100307890011
Board Certified: 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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
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: 100344888009
Board Certified: No
IHP OF SOUTHERN CAL-PHP
906 SYCAMORE AVE STE 104
VISTA, CA 92081
Phone: (760) 630-2550
Fax: (760) 726-2305
After Hours Phone: (760) 630-2550
Provider Gender: Female
NPI: 1740634971
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS
Provider ID: 100268928014
Board Certified: 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: WC
Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM

D. Red de proveedores médicos especialistas

Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

LEONARD, LISA
Provider ID: 100278907006
Board Certified: 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: P, EB, IB, E, R, T, WC
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: 100350746012
Board Certified: 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
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: 100350746002
Board Certified: 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
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: 100350746009
Board Certified: 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

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: 100027909007
Board Certified: 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
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
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: 100188137005
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC
Hours: M 8AM-5PM
TU-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

WEAVER, APRIL
Provider ID: 100188543006
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: PA20775
NPI: 1063552800
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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 9AM-2PM
F 8AM-5PM
SA 8AM-4PM
Website: www.vistacommunityclinic.org

PHYSICIANS ASSISTANT

WEAVER, APRIL
Provider ID: 100188543006
Board Certified: No
IHP OF SOUTHERN CAL-PHP

D. Red de proveedores médicos especialistas

134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Provider Gender: Female
License Number: PA20775
NPI: 1063552800
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: P, EB, IB, E, R, T, WC, ME
Hours: M-TH 9AM-2PM
F 8AM-5PM
SA 8AM-4PM
Website: www.vistacommunityclinic.org

PHYSICIANS ASSISTANT

WHARRAM, JENNIFER
Provider ID: 100396119004
Board Certified: 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 HEALTH MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER
Provider ID: 100020627009
Board Certified: 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: WC
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: 100299589025
Board Certified: 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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

GROVE, JAY
Provider ID: 100000131016
Board Certified: 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 MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 100348070009
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN
Provider ID: 100370717017
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D. Red de proveedores médicos especialistas

American Sign Language (ASL): N
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 100173744023
Board Certified: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Phone: (951) 677-1111
After Hours Phone: (951) 677-1111
Provider Gender: Female
NPI: 1619014479
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PATEL, SAGAR
Provider ID: 100374350004
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 100332067004
Board Certified: 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: WC
Hours: M-F 8AM-5PM
Website: N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

IPA: UCSD Medical Group

PULMONARY DISEASES

KUMAR, AVNEE
Provider ID: 100405584005
Board Certified: 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, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 100362595019
Board Certified: 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, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

SURI, RAJAT
Provider ID: 100374886004
Board Certified: 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: P, R, T, WC, PA
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

E. Red de hospitales

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: WC
Birthing Friendly: 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: WC

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: WC

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:
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: WC
Birthing Friendly: 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

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction. Encuentre los enlaces sobre los Perfiles de Desempeño en la sección delantera de este directorio.
Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

E. Red de hospitales

Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 550006213
NPI: 1831702398
Website: https://www.palomarhealthrehabinstitute.com
American Sign Language (ASL): N
Accessibility: WC

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: SU-SA 12AM-11PM
NPI: 1356410351
Website: www.paradisevalleyhospital.net
American Sign Language (ASL): N
Accessibility: WC

RADY CHILDRENS HOSPITAL SAN DIEGO [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: WC

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: WC

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

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction. Encuentre los enlaces sobre los Perfiles de Desempeño en la sección delantera de este directorio.
Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

E. Red de hospitales

Accessibility: WC
Birthing Friendly: Birthing Friendly: Y

SCRIPPS MEMORIAL 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: WC
Birthing Friendly: Birthing 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__scripps- mercy- hospital- san- diego
American Sign Language (ASL): N
Accessibility: WC
Birthing Friendly: Birthing 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__scripps- mercy- hospital- chula- vista
American Sign Language (ASL): N
Accessibility: WC
Birthing Friendly: Birthing 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: SU-SA 12AM-11:59PM
License Number: 090000404
NPI: 1639172133
Website: N/A
American Sign Language (ASL):

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction. Encuentre los enlaces sobre los Perfiles de Desempeño en la sección delantera de este directorio.
Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

E. Red de hospitales

N
Accessibility: WC

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) 502-5800
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: SU-SA 12AM-11:59PM
License Number: 090000008
NPI: 1396728630
Website: www.sharp.com/hospitals/chula- vista/
American Sign Language (ASL): N
Accessibility: WC
Birthing Friendly: 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: WC

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: SU-SA 12AM-11:59PM
License Number: 080000039
NPI: 1407839921
Website: www.sharp.com
American Sign Language (ASL): N
Accessibility: WC
Birthing Friendly: 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: WC
Birthing Friendly: Birthing Friendly: Y

TRI CITY MEDICAL CTR [1 2 3]
Provider ID: 170049
4002 VISTA WAY
OCEANSIDE, CA 92056

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction. Encuentre los enlaces sobre los Perfiles de Desempeño en la sección delantera de este directorio.
Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

E. Red de hospitales

Phone: (760) 724-8411
After Hours Phone: (760) 724-8411
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
NPI: 1801861190
Website: www.tricitymed.org
American Sign Language (ASL): N
Accessibility: WC
Birthing Friendly: Birthing Friendly: Y

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER [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: WC

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: WC
Birthing Friendly: Birthing 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: WC
Birthing Friendly: Birthing Friendly: Y

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction. Encuentre los enlaces sobre los Perfiles de Desempeño en la sección delantera de este directorio.
Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

F. Centros de atención a largo plazo (LTC, por sus siglas en inglés) y de enfermería especializada (SNF, por sus siglas en

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

MICHALOWSKI HOME
Provider ID: 662926
6205 ALVERTON DR
CARLSBAD, CA 92009
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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: WC

ESCONDIDO

MOUNTAIN SHADOWS COMMUNITY HOMES - APPLE
Provider ID: 662253
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1205951464
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - ASH
Provider ID: 662255
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1720103971
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - BIRCH
Provider ID: 662258
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1710002951
Website: www.mtnshadows.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - CEDAR
Provider ID: 662259
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1912022161
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - CREPE MYRTLE
Provider ID: 662260
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1396860540
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - JACARANDA
Provider ID: 662261
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1346365590
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - LEMON
Provider ID: 662262

2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU 8AM-5PM
NPI: 1881719045
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - MAPLE
Provider ID: 662264
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1871618033
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - OLIVE
Provider ID: 662265
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1396894291
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - ORANGE
Provider ID: 662266
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1982729133
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - PALM
Provider ID: 662267
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1265557417
Website: WWW.MTNSHADOWS.ORG

Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - PINE
Provider ID: 662268
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1831214071
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - PLUM
Provider ID: 662269
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (714) 743-3714
Fax: (760) 736-4173
After Hours Phone: (714) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1861517021
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - SPRUCE
Provider ID: 662269
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1750406914
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS COMMUNITY HOMES - TANGELO
Provider ID: 662271
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1972628121
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

MOUNTAIN SHADOWS

F. Centros de atención a largo plazo (LTC, por sus siglas en inglés) y de enfermería especializada (SNF, por sus siglas en

COMMUNITY HOMES - WILLOW
Provider ID: 662263
2067 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU 8AM-5PM
NPI: 1922123181
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T, WC, ME

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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: WC

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: WC

OCEANSIDE

ANDRU HOME
Provider ID: 664438
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: WC

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: WC

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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: P, EB, IB, E, R, T, WC, ME

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

MOUNTAIN SHADOWS COMMUNITY HOMES - ELM
Provider ID: 662272
600 ROSE CT
SAN MARCOS, CA 92069
Phone: (760) 743-3714
Fax: (760) 736-4173
After Hours Phone: (760) 743-3714
Accepting New Patients: No
Hours: SU-SA 8AM-5PM
NPI: 1003931262
Website: WWW.MTNSHADOWS.ORG
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N

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

MOUNTAIN SHADOWS COMMUNITY HOMES - FIG

Provider ID: 662273

689 DANE DR
SAN MARCOS, CA 92069

Phone: (760) 743-3714

Fax: (760) 736-4173

After Hours Phone: (760) 743-3714

Accepting New Patients: No

Hours: SU-SA 8AM-5PM

NPI: 1992107221

Website: www.mtnshadows.org

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: EB, IB, E, R, T, WC, ME, PA

MOUNTAIN SHADOWS COMMUNITY HOMES - OAK

Provider ID: 662274

866 VIKING LN
SAN MARCOS, CA 92069

Phone: (760) 743-3714

Fax: (760) 736-4173

After Hours Phone: (760) 743-3714

Accepting New Patients: No

Hours: SU-SA 8AM-5PM

NPI: 1235254582

Website: WWW.MTNSHADOWS.ORG

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

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

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: P, EB, IB, E, R, WC

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: WC

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

Hours: SU-SA 12AM-11:59PM

NPI: 1962488007

Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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: WC

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:

F. Centros de atención a largo plazo (LTC, por sus siglas en inglés) y de enfermería especializada (SNF, por sus siglas en

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

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: P, EB, IB, E, R, T, WC, ME

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
Hours: SU-SA 12AM-11:59PM
NPI: 1093137762
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

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
Hours: SU-SA 12AM-11:59PM
NPI: 1962488007
Website: teriinc.org
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: WC

G. Servicios comunitarios para adultos (CBAS, por sus siglas en inglés): Centros de día para adultos

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
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
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: https://openarmsadhc.com/

EL CAJON

EL CAJON ADHC
Provider ID: 637126
854 JACKMAN ST
EL CAJON, CA 92020
Phone: (619) 328-2112
Fax: (619) 328-0069
After Hours Phone: (619) 328-2112
Accepting New Patients: No
Hours: SU-SA 9AM-3PM
License Number: 550008511
NPI: 1184207631
Accessibility: WC
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
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed

G. Servicios comunitarios para adultos (CBAS, por sus siglas en inglés): Centros de día para adultos

cultural competence training?: N
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: WC
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
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: WC
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

G. Servicios comunitarios para adultos (CBAS, por sus siglas en inglés): Centros de día para adultos

12250 CROSTHWAITE CIR
POWAY, CA 92064
Phone: (858) 748-5044
Fax: (858) 748-5405
After Hours Phone: (858) 748-5044
Accepting New Patients: No
Hours: M-F 8AM-4PM
License Number: 60000822
NPI: 1568659977
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
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- pacifica.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: P, EB, IB, E, R, T, WC, ME
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: WC
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

G. Servicios comunitarios para adultos (CBAS, por sus siglas en inglés): Centros de día para adultos

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

Phone: (858) 244-4555

Fax: (858) 724-3302

After Hours Phone: (858) 244-4555

Accepting New Patients: No

Site Languages(s) Spoken: Vietnamese, Mandarin, Spanish

Hours: M-F 8AM-5PM

License Number: 550005837

NPI: 1396201828

Accessibility: WC

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: 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

After Hours Phone: (760) 682-2424

Accepting New Patients: No

Site Languages(s) Spoken: Armenian, Tagalog, Spanish

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

License Number: 060000832

NPI: 1528271186

Accessibility: WC

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.americareadhc.com

H. Servicios de apoyo en el hogar (IHSS, por sus siglas en inglés) en el condado

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

5560 OVERLAND AVE
SAN DIEGO, CA 92123

Phone: (858) 495-5885

License Number: 1710308986

Hours: M-F 8:00AM-5:00PM

Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

ALPINE

ALLEN, AMY
Provider Gender: Female
License Number: MFC87661
NPI: 1366627812
Provider English Spoken: Y
Cultural Competency: N
AMY A ALLEN
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

JACOBS, KARL
Provider Gender: Male
License Number: G79582
NPI: 1669676524
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
KARL M JACOBS
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

MASON, KASSANDRA
Provider Gender: Female
License Number: MFC100059
NPI: 1033632690
Provider English Spoken: Y
Cultural Competency: N
KASSANDRA M MASON
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

MASON, TAMI
Provider Gender: Female
License Number: MFC98712
NPI: 1033650668
Provider English Spoken: Y
Cultural Competency: N
TAMI S MASON
4058 WILLOWS RD
ALPINE, CA 91901
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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: WC

CAMPO

ALLEN, AMY
Provider Gender: Female
License Number: MFC87661
NPI: 1366627812
Provider English Spoken: Y
Cultural Competency: N
AMY A ALLEN
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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
Hours: M-F 8AM-5PM

JACOBS, KARL
Provider Gender: Male
License Number: G79582
NPI: 1669676524
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
KARL M JACOBS
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

MASON, KASSANDRA
Provider Gender: Female
License Number: MFC100059
NPI: 1033632690
Provider English Spoken: Y
Cultural Competency: N
KASSANDRA M MASON
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
After Hours Phone: (619)

445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

MASON, TAMI
Provider Gender: Female
License Number: MFC98712
NPI: 1033650668
Provider English Spoken: Y
Cultural Competency: N
TAMI S MASON
36350 CHURCH RD
CAMPO, CA 91906
Phone: (619) 445-1188
After Hours Phone: (619) 445-1188
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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: P, EB, IB, E, T
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
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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

I. Proveedores de salud conductual

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

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: P, EB, IB, E, T

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
STEPHANIE MARTINEZ

I. Proveedores de salud conductual

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: P, EB, IB, E, T
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
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
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
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 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: P, EB, IB, E, T
Hours: M-F 8AM-5PM

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245

I. Proveedores de salud conductual

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
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
Hours: M-F 8AM-5PM

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, T
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: P, EB, IB, E, T
Hours: M-F 8AM-5PM

EL CAJON

ARAIZA, ERNESTINA
Provider Gender: Female

I. Proveedores de salud conductual

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

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): N

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

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
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

I. Proveedores de salud conductual

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

WHEELER, KIM
Provider Gender: Female
License Number: PSY34237
NPI: 1700577434
Provider English Spoken: Y
Cultural Competency: N
KIM N WHEELER
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 11\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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

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

I. Proveedores de salud conductual

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
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
Hours: M-F 8AM-5PM

DAZO, LESLIE
Provider Gender: Female
License Number: LCS128300
NPI: 1073244471
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
LESLIE Y DAZO
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\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

FOSTER, BRITTLYN
Provider Gender: Female
License Number: LCS127526
NPI: 1750001780
Provider English Spoken: Y
Cultural Competency: N
BRITTLYN N FOSTER
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\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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

I. Proveedores de salud conductual

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

MAYHUGH, ALYSCIA
Provider Gender: Female
License Number: LCS121851
NPI: 1316447907
Provider English Spoken: Y
Cultural Competency: N
ALYSCIA L MAYHUGH
550 W WASHINGTON AVE STE 101
ESCONDIDO, CA 92025
Phone: (760) 466-8600
After Hours Phone: (760) 466-8600
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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
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
Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA
Provider Gender: Female
License Number: PSY31075
NPI: 1932308442
Provider English Spoken: Y
Cultural Competency: N
ALYSSA TEETER-WITT
425 N DATE ST

I. Proveedores de salud conductual

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

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

FALLBROOK

GILROY, LAURA
Provider Gender: Female
License Number: LCS27123
NPI: 1437427978
Provider English Spoken: Y
Provider Language(s) Spoken: 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: EB, IB, E, R, T

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: EB, IB, E, R, T

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

I. Proveedores de salud conductual

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
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

MILES, RENEE
Provider Gender: Female
License Number: LCS70204
NPI: 1053763623
Provider English Spoken: Y
Cultural Competency: N
RENEE S MILES
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: EB, IB, E, R, T

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
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

BRENNER, EINAT
Provider Gender: Female
License Number: PSY33726
NPI: 1679351274
Provider English Spoken: Y
Cultural Competency: N
EINAT BRENNER
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

BRENNER, EINAT
Provider Gender: Female
License Number: PSY33726
NPI: 1679351274
Provider English Spoken: Y
Cultural Competency: N
EINAT BRENNER
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

CASTRO, SHANE
Provider Gender: Male
License Number: A177038
NPI: 1467958413
Provider English Spoken: Y
Cultural Competency: N
SHANE P CASTRO
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

CASTRO, SHANE
Provider Gender: Male
License Number: A177038
NPI: 1467958413
Provider English Spoken: Y
Cultural Competency: N
SHANE P CASTRO
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

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: WC
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

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
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

DUARTE, KRISTEN
Provider Gender: Female
License Number: PSY31227
NPI: 1093119364
Provider English Spoken: Y
Cultural Competency: N
KRISTEN L DUARTE
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

DUARTE, KRISTEN
Provider Gender: Female
License Number: PSY31227
NPI: 1093119364
Provider English Spoken: Y
Cultural Competency: N
KRISTEN L DUARTE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

EGAN, KAITLYN
Provider Gender: Female
License Number: PSY32214
NPI: 1629653860

I. Proveedores de salud conductual

Provider English Spoken: Y
Cultural Competency: N
KAITLYN N EGAN
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

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): N

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: WC
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

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

I. Proveedores de salud conductual

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

HOLTZ, HANNAH
Provider Gender: Female
License Number: LCS105699
NPI: 1578012043
Provider English Spoken: Y
Cultural Competency: N
HANNAH K HOLTZ
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

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: P, E, R, WC, PA
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

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: WC
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

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: WC
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
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: WC
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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

MITCHELL, NORA
Provider Gender: Female
License Number: LCS88855
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

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
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
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
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: WC
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
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: WC
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)

I. Proveedores de salud conductual

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

PELHAM, WILLIAM
Provider Gender: Male
License Number: PSY33091
NPI: 1306629399
Provider English Spoken: Y
Cultural Competency: N
WILLIAM E PELHAM III
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

PERRY, WILLIAM
Provider Gender: Male
License Number: PSY12229
NPI: 1801811195
Provider English Spoken: Y
Cultural Competency: N
WILLIAM PERRY
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

PERRY, WILLIAM
Provider Gender: Male
License Number: PSY12229
NPI: 1801811195
Provider English Spoken: Y
Cultural Competency: N
WILLIAM PERRY
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
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
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
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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
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: WC
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: WC
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

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
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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

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
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
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

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

ZLATAR, ZVINKA
Provider Gender: Female
License Number: PSY26230
NPI: 1497139059
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ZVINKA Z ZLATAR
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

NATIONAL CITY

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

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
Hours: M-TH 8AM-6PM 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
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
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
Hours: M-F 8AM-5PM SA 9AM-4PM

BELL, JENNIFER
Provider Gender: Female

I. Proveedores de salud conductual

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
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

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

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

MONTEZ, REBECCA
Provider Gender: Female
License Number: LCS26869
NPI: 1396047809
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

I. Proveedores de salud conductual

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

ORTIZ, BEVERLY
Provider Gender: Female
License Number: MFC121355
NPI: 1760826572
Provider English Spoken: Y
Cultural Competency: N
BEVERLY L ORTIZ
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 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

TRIPPITELLI, CAROL
Provider Gender: Female
License Number: C161880
NPI: 1396040218
Provider English Spoken: Y
Cultural Competency: N
CAROL L TRIPPITELLI
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 15\65
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

TRIPPITELLI, CAROL
Provider Gender: Female
License Number: C161880
NPI: 1396040218
Provider English Spoken: Y
Cultural Competency: N
CAROL L TRIPPITELLI
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: 15\65
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

RAMONA

YELA CASTILLO, ANA
Provider Gender: Female
License Number: MFC153075
NPI: 1720518731
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ANA R YELA CASTILLO

I. Proveedores de salud conductual

220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-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
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 restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T

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
Hours: M-F 8AM-5PM

ARCEO, JACQUELINE
Provider Gender: Female
License Number: LCS110194
NPI: 1093350258
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM

BANKS, SARAH
Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
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
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

BANKS, SARAH
Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
Hours: M-F 8AM-5PM

BAQIR, HUMA
Provider Gender: Female
License Number: A188608
NPI: 1306499132
Provider English Spoken: Y
Cultural Competency: N
HUMA BAQIR
350 DICKINSON ST

I. Proveedores de salud conductual

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

BAQIR, HUMA
Provider Gender: Female
License Number: A188608
NPI: 1306499132
Provider English Spoken: Y
Cultural Competency: N
HUMA BAQIR
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

BAQIR, HUMA
Provider Gender: Female
License Number: A188608
NPI: 1306499132
Provider English Spoken: Y
Cultural Competency: N
HUMA BAQIR
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

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

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
Hours: M-F 8AM-5PM

BRENNER, EINAT
Provider Gender: Female
License Number: PSY33726
NPI: 1679351274
Provider English Spoken: Y
Cultural Competency: N
EINAT BRENNER
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: WC
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
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: WC
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
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

I. Proveedores de salud conductual

restriction
American Sign Language (ASL): N

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): N

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

CALLAGHAN, KATHRYN
Provider Gender: Female
License Number: MFC106901
NPI: 1558768812
Provider English Spoken: Y
Cultural Competency: N
KATHRYN R CALLAGHAN
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

CASTELLANOS, ARIANA
Provider Gender: Female
License Number: MFC145671
NPI: 1922534890
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ARIANA M CASTELLANOS
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
TDD: U
Min/Max Age: 0\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

CASTRO, SHANE

I. Proveedores de salud conductual

Provider Gender: Male
License Number: A177038
NPI: 1467958413
Provider English Spoken: Y
Cultural Competency: N
SHANE P CASTRO
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

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
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: WC
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

CRISOL, CAROLINE
Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y

I. Proveedores de salud conductual

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

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
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: P, EB, IB, E, R, T
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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

American Sign Language (ASL): N

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

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
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
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: P, EB, IB, E, R, T
Hours: M-F 8AM-5PM

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):

I. Proveedores de salud conductual

N
Accessibility: WC
Hours: M-F 8AM-5PM

ESPERANZA, MELIZZA
Provider Gender: Female
License Number: LCS100093
NPI: 1184763005
Provider English Spoken: Y
Cultural Competency: N
MELIZZA R ESPERANZA
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

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
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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
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

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

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

FRY, LIANE
Provider Gender: Female
License Number: MFC42570
NPI: 1003110917
Provider English Spoken: Y
Cultural Competency: N
LIANE M FRY
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
Hours: M-F 8AM-4:30PM

GIAMONA, KRISTEN
Provider Gender: Female
License Number: PSY28419

I. Proveedores de salud conductual

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

GIAMONA, KRISTEN
Provider Gender: Female
License Number: PSY28419
NPI: 1376824383
Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T

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

JAHANGIR, SAIRAH
Provider Gender: Female
License Number: LCS121853
NPI: 1932940400
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
SAIRAH B JAHANGIR
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: 0\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

JOSHI, YASH
Provider Gender: Male
License Number: A147156
NPI: 1598151433
Provider English Spoken: Y
Cultural Competency: N
YASH B JOSHI

I. Proveedores de salud conductual

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: WC
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
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, E, R, WC, PA
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

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

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 Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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 Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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

KLUEMPER, NICOLE
Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 2\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R, T

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

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

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

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

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

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

LANIOUS, OKSANA
Provider Gender: Female
License Number: PSY33536
NPI: 1518233311
Provider English Spoken: Y
Cultural Competency: N
OKSANA A LANIOUS
8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122
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

LEDBETTER, ALEX
Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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

LI, XIA
Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y

I. Proveedores de salud conductual

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

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

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
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

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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

LOPEZ, SAMANTHA
Provider Gender: Female
License Number: MFC134199
NPI: 1790407732
Provider English Spoken: Y
Cultural Competency: N
SAMANTHA L LOPEZ
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

LUNDEBERG, HOLLY
Provider Gender: Female
License Number: LCS119125
NPI: 1841770351
Provider English Spoken: Y
Cultural Competency: N
HOLLY L LUNDEBERG
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
Hours: M-F 8AM-5PM

LUNDEBERG, HOLLY
Provider Gender: Female
License Number: LCS119125
NPI: 1841770351
Provider English Spoken: Y
Cultural Competency: N
HOLLY L LUNDEBERG
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
Hours: M-F 8AM-5PM

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 14\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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: WC

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

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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
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
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: WC
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
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

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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
Hours: M-F 8AM-5PM

MIRON, JEAN-PHILIPPE
Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y
Cultural Competency: N
JEAN-PHILIPPE MIRON
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC

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
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

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

MIYAGI, NICOLE
Provider Gender: Male
License Number: LCS101958
NPI: 1225462799
Provider English Spoken: Y
Cultural Competency: N
NICOLE A MIYAGI
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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

MOORE, SHAVON
Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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: WC
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
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
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

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: WC
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: WC
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
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

I. Proveedores de salud conductual

American Sign Language (ASL): N
Accessibility: WC
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

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

NORMAN, MARC
Provider Gender: Male
License Number: PSY16278
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: WC
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: WC
Hours: M-F 8AM-5PM

ORFF, HENRY
Provider Gender: Male
License Number: PSY27099

I. Proveedores de salud conductual

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: WC
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

PAGE, JAIMIE
Provider Gender: Female
License Number: LCS129725
NPI: 1942857248
Provider English Spoken: Y
Cultural Competency: N
JAIMIE L PAGE
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\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

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
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

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

I. Proveedores de salud conductual

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

PERRY, WILLIAM
Provider Gender: Male
License Number: PSY12229
NPI: 1801811195
Provider English Spoken: Y
Cultural Competency: N
WILLIAM PERRY
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
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

PERRY, WILLIAM
Provider Gender: Male
License Number: PSY12229
NPI: 1801811195
Provider English Spoken: Y
Cultural Competency: N
WILLIAM PERRY
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: WC
Hours: M-F 8AM-5PM

PERRY, WILLIAM
Provider Gender: Male
License Number: PSY12229
NPI: 1801811195
Provider English Spoken: Y
Cultural Competency: N
WILLIAM PERRY
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: WC
Hours: M-F 8AM-5PM

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

I. Proveedores de salud conductual

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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
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
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: P, EB, IB, E, R, T
Hours: M-TU 8:30AM-5:30PM
TH-F 8:30AM-5:30PM

RIBEIRO CALDAS DOMINGUES, ISABEL
Provider Gender: Female
License Number: A132160
NPI: 1023367216
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
ISABEL A RIBEIRO CALDAS

I. Proveedores de salud conductual

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: WC
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: WC
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: WC
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
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

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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
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
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
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
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

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

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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
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
Hours: M-F 8AM-5PM

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender

restriction
American Sign Language (ASL): N
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: WC
Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: WC
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: WC
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

SCHNEEBERGER, ANDRES
Provider Gender: Male

I. Proveedores de salud conductual

License Number: C175502
NPI: 1184867376
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

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

I. Proveedores de salud conductual

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

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
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

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

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

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

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

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

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

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

VALLIDO, CHRISTIAN BORGE
Provider Gender: Male
License Number: MFC131734
NPI: 1992433049
Provider English Spoken: Y
Cultural Competency: N
CHRISTIAN BORGE B VALLIDO
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

VARGAS, YASHIA
Provider Gender: Female
License Number: LCS99406
NPI: 1881015550
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
YASHIA VARGAS
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
After Hours Phone: (858) 966-5855
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

VARGAS, YASHIA
Provider Gender: Female
License Number: LCS99406
NPI: 1881015550
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
YASHIA VARGAS
4305 UNIVERSITY AVE STE 545
SAN DIEGO, CA 92105
Phone: (619) 280-2905
After Hours Phone: (619) 280-2905
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

VIETEN, CASSANDRA
Provider Gender: Female
License Number: PSY31272
NPI: 1336716992
Provider English Spoken: Y
Cultural Competency: N
CASSANDRA E VIETEN
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
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

VIETEN, CASSANDRA
Provider Gender: Female
License Number: PSY31272
NPI: 1336716992
Provider English Spoken: Y
Cultural Competency: N
CASSANDRA E VIETEN
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

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 Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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
Hours: M-F 8AM-5PM

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

YIDI, DIANA
Provider Gender: Female
License Number: LCS110300
NPI: 1194438663
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
DIANA L YIDI
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8:30AM-5:30PM

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
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: 6\21
Gender Restriction: No Gender restriction

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

American Sign Language (ASL): N
Hours: M 9AM-7PM W-F 9AM-6PM

SAN MARCOS

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 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: WC
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 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: 0\18
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

MELENDEZ, DAVIS
Provider Gender: Male
License Number: LCS111804
NPI: 1750724100
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
DAVIS 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
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) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

I. Proveedores de salud conductual

Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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
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
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
Hours: M-F 8AM-8PM
SA 8AM-2PM

FLEWELLING, CAITLIN
Provider Gender: Female
License Number: LCS98954
NPI: 1336528215
Provider English Spoken: Y
Cultural Competency: N
CAITLIN L FLEWELLING
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\60
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
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

I. Proveedores de salud conductual

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

IBANEZ, BERENICE
Provider Gender: Female
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

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

KRIKSCIUN, JESSICA
Provider Gender: Female
License Number: A180605
NPI: 1174151690
Provider English Spoken: Y
Cultural Competency: N
JESSICA J KRIKSCIUN
1666 PRECISION PARK LN

I. Proveedores de salud conductual

SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\99
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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
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
Hours: M-F 8AM-5PM

SENFT, AMANDA
Provider Gender: Female
License Number: LCS99056
NPI: 1215420138
Provider English Spoken: Y
Cultural Competency: N
AMANDA L SENFT
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
Hours: M-F 8AM-5PM

TAPIA, ASHLEY
Provider Gender: Female
License Number: LCS118965
NPI: 1952821472
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

I. Proveedores de salud conductual

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
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
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: 6\21
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-TU 9AM-7PM W-F 9AM-6PM

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

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

BELL, JENNIFER

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

I. Proveedores de salud conductual

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

TRIPPITELLI, CAROL
Provider Gender: Female
License Number: C161880
NPI: 1396040218
Provider English Spoken: Y
Cultural Competency: N
CAROL L TRIPPITELLI
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: Spanish
TDD: U
Min/Max Age: 15\65
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Hours: M-F 8AM-5PM

TRIPPITELLI, CAROL
Provider Gender: Female
License Number: C161880
NPI: 1396040218
Provider English Spoken: Y
Cultural Competency: N
CAROL L TRIPPITELLI
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 15\65
Gender Restriction: No Gender

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

J. Proveedores de servicios de la vista

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

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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

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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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)

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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

KIKUNAGA, HENRY, OD
Provider Gender: Male
License Number: 13186
NPI: 1841406394
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION BONITA
180 OTAY LAKES RD STE 201
BONITA, CA 91902
Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone: (619) 267-9900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Japanese, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM
F 8AM-4PM
SA 8AM-12AM

TOMIKA, TIFFANY, OD
Provider Gender: Female
License Number: 35552
NPI: 1376320812
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION BONITA
180 OTAY LAKES RD STE 201

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

BONITA, CA 91902
Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone: (619) 267-9900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Japanese, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM
F 8AM-4PM
SA 8AM-12AM

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: Y
TOTAL VISION BONITA
180 OTAY LAKES RD STE 201
BONITA, CA 91902
Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone: (619) 267-9900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Japanese, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM
F 8AM-4PM
SA 8AM-12AM

VO, LISA, OD
Provider Gender: Female
License Number: 35327
NPI: 1336476605
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
TOTAL VISION BONITA
180 OTAY LAKES RD STE 201
BONITA, CA 91902
Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone: (619) 267-9900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Japanese, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM
F 8AM-4PM
SA 8AM-12AM

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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

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
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 10:30AM-7PM
TU-W 8:30AM-5PM
TH 10:30AM-7PM
F 8:30AM-4PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: TU-W 11AM-6PM
TH-F 10AM-6:30PM
SA 10AM-6:30PM

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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 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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

DEANER-HARRINGTON, SHERRY, OD
Provider Gender: Female
License Number: 10628
NPI: 1588858062
Provider English Spoken: Y

J. Proveedores de servicios de la vista

Provider Language(s) Spoken: Spanish
Cultural Competency: Y
TOTAL VISION TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone: (619) 425-7990
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-5:30PM

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: P, EB, IB, E, R
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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

KELLY, KIM, OD
Provider Gender: Female
License Number: 36002
NPI: 1629963459
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

KIKUNAGA, HENRY, OD
Provider Gender: Male
License Number: 13186
NPI: 1841406394
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone: (619) 425-7990
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-5:30PM

KIKUNAGA, HENRY, OD
Provider Gender: Male
License Number: 13186
NPI: 1841406394
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION EASTLAKE
890 EASTLAKE PKWY STE 102
CHULA VISTA, CA 91914
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone: (619) 216-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Hours: M-W 9AM-6PM
TH 10AM-6PM
F 9AM-6PM
SA 8:30AM-2PM

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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

KING, MARY, OD
Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

MASCARENO, EFRAIN, OD
Provider Gender: Male
License Number: 10906
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: Y
CLEAR VISION OPTOMETRY DR MASCARENO
440 4TH AVE
CHULA VISTA, CA 91910
Phone: (619) 427-2020
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 9AM-6PM
F 9AM-5PM

NGUYEN, TRACY, OD
Provider Gender: Female
License Number: 10859
NPI: 1265596621
Provider English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 10AM-3PM

NGUYEN, THERESA, OD
Provider Gender: Female
License Number: 35530
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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

PACK, JOHN, OD
Provider Gender: Male
License Number: 9684
NPI: 1598723587
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
TOTAL VISION TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone: (619) 425-7990
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

J. Proveedores de servicios de la vista

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-5:30PM

PACK, JOHN, OD
Provider Gender: Male
License Number: 9684
NPI: 1598723587
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
TOTAL VISION EASTLAKE
890 EASTLAKE PKWY STE 102
CHULA VISTA, CA 91914
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone: (619) 216-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH 10AM-6PM
F 9AM-6PM
SA 8:30AM-2PM

PHAM, NINA, OD
Provider Gender: Female
License Number: 35360
NPI: 1598403867
Provider English Spoken: Y
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

W-F 8AM-5PM

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
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

TOMIKA, TIFFANY, OD
Provider Gender: Female
License Number: 35552
NPI: 1376320812
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

TOMIKA, TIFFANY, OD
Provider Gender: Female
License Number: 35552
NPI: 1376320812
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION EASTLAKE
890 EASTLAKE PKWY STE 102

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

CHULA VISTA, CA 91914
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone: (619) 216-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH 10AM-6PM
F 9AM-6PM
SA 8:30AM-2PM

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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: Y
TOTAL VISION TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone: (619) 425-7990
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-5:30PM

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: Y
TOTAL VISION EASTLAKE
890 EASTLAKE PKWY STE 102
CHULA VISTA, CA 91914
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone: (619) 216-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH 10AM-6PM
F 9AM-6PM
SA 8:30AM-2PM

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: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 11AM-6PM
TH-F 9AM-6PM

VO, LISA, OD
Provider Gender: Female
License Number: 35327
NPI: 1336476605
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
TOTAL VISION TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone: (619) 425-7990
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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

VO, LISA, OD
Provider Gender: Female
License Number: 35327
NPI: 1336476605
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
TOTAL VISION EASTLAKE
890 EASTLAKE PKWY STE 102
CHULA VISTA, CA 91914
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone: (619) 216-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH 10AM-6PM
F 9AM-6PM
SA 8:30AM-2PM

CORONADO

COCKERHAM, KIMBERLY, MD
Provider Gender: Female
License Number: G86885
NPI: 1366493629
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

OU, JOCELYN, OD
Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

ASIS, STEPHANIE, OD
Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

BARNARD, LUKE, MD
Provider Gender: Male
License Number: A195991
NPI: 1710543111
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

DEANER-HARRINGTON, SHERRY, OD
Provider Gender: Female
License Number: 10628
NPI: 1588858062
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
TOTAL VISION EL CAJON
1093 E MAIN ST
EL CAJON, CA 92021
Phone: (619) 444-1153
Fax: (619) 444-1154
After Hours Phone: (619) 444-1153
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5:30PM
W 8:30AM-5PM
TH-F 9AM-5PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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) 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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

MCMURREN, BRITTANY, OD
Provider Gender: Female
License Number: 14824
NPI: 1104243815
Provider English Spoken: Y
Cultural Competency: Y
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Italian, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

PANDYA, BHUMIKA, OD
Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None

J. Proveedores de servicios de la vista

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

TOMIKA, TIFFANY, OD
Provider Gender: Female
License Number: 35552
NPI: 1376320812
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION EL CAJON
1093 E MAIN ST
EL CAJON, CA 92021
Phone: (619) 444-1153
Fax: (619) 444-1154

J. Proveedores de servicios de la vista

After Hours Phone: (619) 444-1153
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5:30PM
W 8:30AM-5PM
TH-F 9AM-5PM

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

VO, LISA, OD
Provider Gender: Female
License Number: 35327
NPI: 1336476605
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Cultural Competency: Y
TOTAL VISION EL CAJON
1093 E MAIN ST
EL CAJON, CA 92021
Phone: (619) 444-1153
Fax: (619) 444-1154
After Hours Phone: (619) 444-1153
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5:30PM
W 8:30AM-5PM
TH-F 9AM-5PM

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
Site Languages(s) Spoken: Italian, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

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 restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

CHANG, TOM, MD
Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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): N
Accessibility: P, EB, IB, E, R
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): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

DYER, SHARON, OD
Provider Gender: Female

J. Proveedores de servicios de la vista

License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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):

J. Proveedores de servicios de la vista

N
Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
Provider English Spoken: Y
Provider Language(s) Spoken: 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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

AMINI, AFSANEH, OD
Provider Gender: Female
License Number: 14013
NPI: 1790099943
Provider English Spoken: Y
Cultural Competency: Y
AMERICAN EYE OPTOMETRY
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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 restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHANG, TOM, MD
Provider Gender: Male

J. Proveedores de servicios de la vista

License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

KLAREN, AMANDA, OD
Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

LE, TAM, OD
Provider Gender: Female
License Number: 12951
NPI: 1235268707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
TAM T LE OD INC
1711 E VALLEY PKWY STE 109
ESCONDIDO, CA 92027
Phone: (760) 737-6064
Fax: (760) 737-6064
After Hours Phone: (760) 737-6064
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MOVAGHAR, MANSOOR, MD
Provider Gender: Male
License Number: A100897

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None

J. Proveedores de servicios de la vista

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9:30AM-5PM
TH 10AM-6PM
F 9:30AM-1PM

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: P, EB, IB, E, R
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
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):

J. Proveedores de servicios de la vista

N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: French
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM W-TH 11AM-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
Accessibility: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

COLEMAN, BROOKE, OD
Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: 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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

J. Proveedores de servicios de la vista

N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

CANDELARIA, AMBER, OD
Provider Gender: Female
License Number: 35724
NPI: 1013759117
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

CANDELARIA, AMBER, OD
Provider Gender: Female
License Number: 35724
NPI: 1013759117
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

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

J. Proveedores de servicios de la vista

Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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) 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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

HOO, PAMELA, OD
Provider Gender: Female
License Number: 11033
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

HUANG, GRACE, OD
Provider Gender: Female

J. Proveedores de servicios de la vista

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

J. Proveedores de servicios de la vista

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

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 Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MCCLEAN, ESMERALDA, OD
Provider Gender: Female
License Number: 15001

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

MOOR, TRACY, OD
Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

SA 8AM-2PM

MOOR, TRACY, OD
Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

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 restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

PERRY, ARTHUR, MD
Provider Gender: Male
License Number: C37934
NPI: 1194832725
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

PRATT, STEVEN, MD
Provider Gender: Male
License Number: G32379
NPI: 1407963044
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

VO, ANDREW MINH, OD
Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

VO, ANDREW MINH, OD
Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

YU, CAROL, OD
Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License Number: A147199
NPI: 1679865950
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Hours: M-F 8AM-5PM

BARNARD, LUKE, MD
Provider Gender: Male
License Number: A195991
NPI: 1710543111
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

J. Proveedores de servicios de la vista

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:30AM-5PM SA 9:30AM-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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U

J. Proveedores de servicios de la vista

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

GRAY, IGA, MD
Provider Gender: Female
License Number: A174875
NPI: 1033538350
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-4PM
W-TH 9AM-6PM
F 9AM-5PM

HSU, CHRISTOPHER, MD
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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) 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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

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 restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KATZMAN, LEE, MD
Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Hours: M-F 8AM-5PM

KIKUNAGA, HENRY, OD
Provider Gender: Male
License Number: 13186
NPI: 1841406394
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION LA MESA
7090 PARKWAY DR STE A
LA MESA, CA 91942
Phone: (619) 460-2020
Fax: (619) 462-2020
After Hours Phone: (619) 460-2020
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5:30PM
W 8AM-4:30PM
TH 9AM-5:30PM
F 8AM-4:30PM
SA 9AM-12:30AM

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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:30AM-5PM
SA 9:30AM-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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

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: P, EB, IB, E, R
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:

J. Proveedores de servicios de la vista

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

NGUYEN, THY, OD
Provider Gender: Female
License Number: 12746
NPI: 1750490413
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Accepting New Patients: Yes
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish*

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

TOMIKA, TIFFANY, OD
Provider Gender: Female
License Number: 35552
NPI: 1376320812
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION LA MESA
7090 PARKWAY DR STE A
LA MESA, CA 91942
Phone: (619) 460-2020
Fax: (619) 462-2020
After Hours Phone: (619) 460-2020
Accepting New Patients: Yes

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5:30PM
W 8AM-4:30PM
TH 9AM-5:30PM
F 8AM-4:30PM
SA 9AM-12:30AM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TSUI, NANCY, OD
Provider Gender: Female

J. Proveedores de servicios de la vista

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

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

LEMON GROVE

DEANER-HARRINGTON, SHERRY, OD
Provider Gender: Female
License Number: 10628
NPI: 1588858062
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
TOTAL VISION LEMON GROVE
7850 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 697-2020
Fax: (619) 697-0728
After Hours Phone: (619) 697-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM F 9AM-5PM

KIKUNAGA, HENRY, OD
Provider Gender: Male
License Number: 13186
NPI: 1841406394
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION LEMON GROVE
7850 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 697-2020
Fax: (619) 697-0728
After Hours Phone: (619) 697-2020
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM F 9AM-5PM

TOMIKA, TIFFANY, OD
Provider Gender: Female
License Number: 35552
NPI: 1376320812
Provider English Spoken: Y
Cultural Competency: Y
TOTAL VISION LEMON GROVE
7850 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 697-2020
Fax: (619) 697-0728
After Hours Phone: (619) 697-2020
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM F 9AM-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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

BARNARD, LUKE, MD
Provider Gender: Male
License Number: A195991
NPI: 1710543111
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

KALRA, ANKUR, OD
Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
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, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: 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

J. Proveedores de servicios de la vista

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: 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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

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, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: 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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: TU-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
American Sign Language (ASL):

J. Proveedores de servicios de la vista

N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10AM-6PM
W 10AM-6PM
F 10AM-6PM
SA 10AM-2PM

MARYOUNG, ALLISON, OD
Provider Gender: Female
License Number: 35512
NPI: 1083309124
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MARYOUNG, ALLISON, OD
Provider Gender: Female
License Number: 35512
NPI: 1083309124
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes

J. Proveedores de servicios de la vista

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

MENDOZA, RAYMUNDO, OD
Provider Gender: Male
License Number: 8150
NPI: 1306837760
Provider English Spoken: Y
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

NGUYEN, THERESA, OD
Provider Gender: Female
License Number: 35530
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, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: 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: P, EB, IB, E, R
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
Provider English Spoken: Y
Provider Language(s) Spoken: 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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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 restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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 Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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

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: P, EB, IB, E, R

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: P, EB, IB, E, R

Public transportation (within 1/2 mile from Site): 1U

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

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
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, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: P, EB, IB, E, R

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-6PM
SA 9AM-5PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: TU-F 9:30AM-5PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-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
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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM
SA 8:30AM-2PM

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: P, EB, IB, E, R
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

BECKMAN, JESSICA, OD
Provider Gender: Female
License Number: 35904
NPI: 1154071447
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: P, EB, IB, E, R
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

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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 Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

CANDELARIA, AMBER, OD
Provider Gender: Female
License Number: 35724
NPI: 1013759117
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CANDELARIA, AMBER, OD
Provider Gender: Female
License Number: 35724
NPI: 1013759117
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5PM
W 10AM-6PM
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-5PM
TH 9AM-1:30PM
F 9AM-5PM
SA 9AM-1PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841

J. Proveedores de servicios de la vista

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM
SA 8:30AM-2PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
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: P, EB, IB, E, R
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)

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

HO, AMIEE, OD
Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

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: (858) 844-9441
After Hours Phone: (858) 844-9441
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: TH-F 9AM-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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

HOFFMAN, STEVEN, OD
Provider Gender: Male
License Number: 34561
NPI: 1033736079
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

HUANG, GRACE, OD
Provider Gender: Female

J. Proveedores de servicios de la vista

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

J. Proveedores de servicios de la vista

restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUYNH, PAUL, MD
Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

JOMOC, CAITLIN, OD
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Accessibility: P, EB, IB, E, R
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): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8:30AM-4:30PM
F 8:30AM-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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

KLAREN, AMANDA, OD
Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-6PM
TU-F 8AM-5PM
SA 8AM-3PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

MCCLEAN, ESMERALDA, OD
Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MCCLEAN, ESMERALDA, OD
Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

MOOR, TRACY, OD
Provider Gender: Female

J. Proveedores de servicios de la vista

License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-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
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: P, EB, IB, E, R
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, 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
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender

J. Proveedores de servicios de la vista

restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-6PM
TU-F 8AM-5PM
SA 8AM-3PM

NGUYEN, THANH, OD
Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
NEW OPTIX OPTOMETRY
12650 SABRE SPRINGS PKWY # 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: Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5:30PM

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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
NPI: 1861170573

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

J. Proveedores de servicios de la vista

N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TH 10AM-6PM
F 9AM-6PM
SA 9AM-2PM

POUSTI, SHEIVA, OD
Provider Gender: Female
License Number: 10403
NPI: 1730240052
Provider English Spoken: Y
Cultural Competency: Y
SAN DIEGO EYE CLINIC OPTOMETRY
3560 FAIRMOUNT AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 431-2020
Fax: (619) 376-2100
After Hours Phone: (619) 431-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: SU-SA 9AM-6PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

SHOLLY, ALLISON, OD
Provider Gender: Female
License Number: 34740
NPI: 1447886601
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: P, EB, IB, E, R
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

SHULKIN, MITCHELL, OD
Provider Gender: Male
License Number: 8153
NPI: 1770531865
Provider English Spoken: Y
Cultural Competency: Y
NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
Phone: (858) 674-1276
Fax: (858) 674-5863
After Hours Phone: (858) 674-1276
Accepting New Patients: Yes
Site English Spoken: Y

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Site Languages(s) Spoken: Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-4PM
TU 7AM-2PM
W-TH 10AM-6PM
F 10AM-3PM

TA, MINI, OD
Provider Gender: Female
License Number: 15170
NPI: 1578955605
Provider English Spoken: Y
Cultural Competency: Y
NEW OPTIX OPTOMETRY
12650 SABRE SPRINGS PKWY # 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: Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5:30PM

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
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: P, EB, IB, E, R
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

TILLMAN, SYLVIA, OD
Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

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
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: P, EB, IB, E, R
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

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TRAJANO, CHARMINE, OD
Provider Gender: Female
License Number: 14993
NPI: 1699183673
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

TRAN, MICHAEL, OD
Provider Gender: Male
License Number: 14530
NPI: 1649524216
Provider English Spoken: Y

J. Proveedores de servicios de la vista

Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
NEW OPTIX OPTOMETRY
12650 SABRE SPRINGS PKWY # 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: Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5:30PM

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 10AM-3PM
W 10AM-3PM
F 10AM-5PM
SA 9AM-1PM

TU, CHARLES, OD
Provider Gender: Male
License Number: 34618
NPI: 1073137691
Provider English Spoken: Y
Cultural Competency: Y
SAN DIEGO 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: Spanish, Vietnamese

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U

TU, CHARLES, OD
Provider Gender: Male
License Number: 34618
NPI: 1073137691
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-6PM
TU-F 8AM-5PM
SA 8AM-3PM

VAN DER LINDE, HARRISON, OD
Provider Gender: Male
License Number: 34353
NPI: 1336798123
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Contract Terminated as of Nov 25 2024 12:00AM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: 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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

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
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TU 9AM-5PM
W 9AM-3PM
TH 8AM-4PM
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: P, EB, IB, E, R
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: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

TRAN, MICHAEL, OD
Provider Gender: Male
License Number: 14530
NPI: 1649524216
Provider English Spoken: Y
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

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

J. Proveedores de servicios de la vista

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: P, EB, IB, E, R
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 Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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 Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
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
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):

J. Proveedores de servicios de la vista

N
Accessibility: P, EB, IB, E, R
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: 35530
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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

J. Proveedores de servicios de la vista

Cultural Competency: Y
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD STE E
VALLEY CENTER, CA 92082
Phone: (760) 751-8771
Fax: (760) 249-7325
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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: P, EB, IB, E, R
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
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

J. Proveedores de servicios de la vista

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

TRAN, THAO, OD
Provider Gender: Female
License Number: 12867
NPI: 1962581421
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
KINDERSPECS-GOOD EYES OPTOMETRY
110 CIVIC CENTER DR STE 204
VISTA, CA 92084
Phone: (760) 753-3665
Fax: (408) 969-1653
After Hours Phone: (760) 753-3665
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: P, EB, IB, E, R
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 10AM-5PM

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

Tabla de población de enfoque (POF) de ECM

		Población de enfoque de ECM	Adulto	Niños y jóvenes
	1	Personas sin hogar	✓	✓
	2	Personas en riesgo de utilización evitable de hospitales o salas de urgencias *(formalmente denominados "altos usuarios")*	✓	✓
	3	Personas con necesidades de trastornos graves de salud mental o por consumo de sustancias	✓	✓
	4	Individuos en transición del encarcelamiento	✓	✓
	5	Adultos que viven en la comunidad y están en riesgo de institucionalización para cuidados a largo plazo (LTC)	✓	
	6	Residentes de centros de enfermería para adultos en transición a la comunidad	✓	
	7	Niños y jóvenes inscritos en California Children's Services (CCS) o CCS Whole Child Model (WCM) con necesidades adicionales más allá de la condición de CCS		✓
	8	Niños y jóvenes que reciben bienestar del menor		✓
	9	Población de enfoque con equidad de natalidad	✓	✓

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

CARLSBAD

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

7632 CORTINA CT
CARLSBAD, CA 92009
Phone: (760) 707-9256
After Hours Phone: (760) 707-9256
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
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

CHULA VISTA

HORIZON RECUPERATIVE CARE

171 4TH AVE
CHULA VISTA, CA 91910
Phone: (858) 326-1100
After Hours Phone: (858) 326-1100
Website: www.horizoncenters.org
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: (858) 326-1100

CORONA

TANGELO

1701 N DELILAH ST
CORONA, CA 92879
Phone: (904) 671-2995
After Hours Phone: (904) 671-2995
Website: N/A
Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Email for New Referrals and Existing Patients: CHRIS.OCONNOR@JOINTANGELO.COM
Phone for New Referrals and Existing Patients: (904) 671-2995

CULVER CITY

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE
STE 465
CULVER CITY, CA 90230

Phone: (323) 203-0070

After Hours Phone: (323) 203-0070

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

MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE
STE 465
CULVER CITY, CA 90230

Phone: (323) 203-0070

After Hours Phone: (323) 203-0070

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

INTEGRATED HEALTH PARTNERS

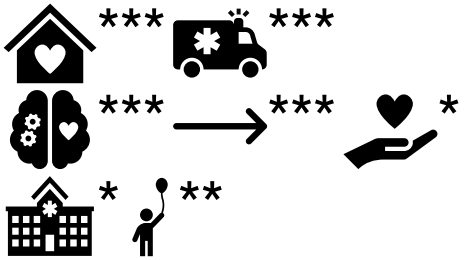
855 E MADISON AVE
EL CAJON, CA 92020

Phone: (833) 867-4642

After Hours Phone: (833) 867-4642

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 572169;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

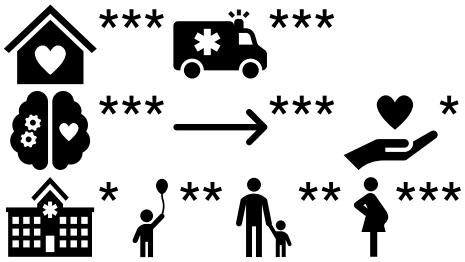
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

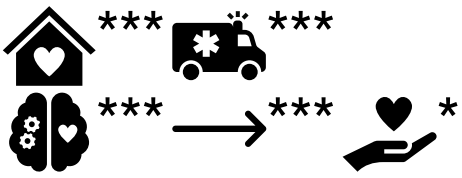
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:

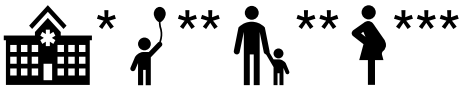


Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:





Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

EL SEGUNDO

24HR HOMECARE LLC

200 N PACIFIC COAST HWY STE 300

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

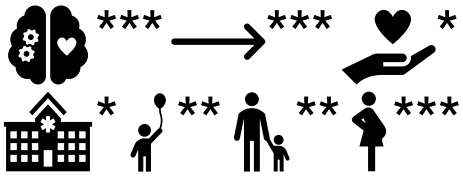
K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

EL SEGUNDO, CA 90245
Phone: (310) 906-3683
After Hours Phone: (310) 906-3683
Website: N/A
Community Supports Services: Personal Care and Homemaker Services,Respite Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (310) 906-3683

ENCINITAS

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

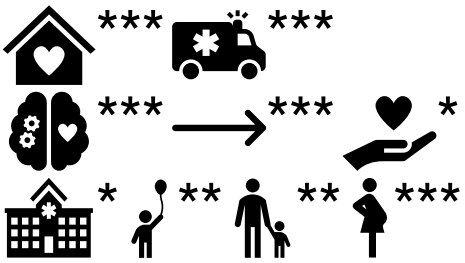
1084 N EL CAMINO REAL STE B149
ENCINITAS, CA 92024
Phone: (619) 273-3295
After Hours Phone: (619) 273-3295
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: referrals@sdwellnesscollaborative.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
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: referrals@sdwellnesscollaborative.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

*Adultos **Niños ***Adultos y niños
† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

(PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

ESCONDIDO

TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
Phone: (310) 280-5203
After Hours Phone: (310) 280-5203
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
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

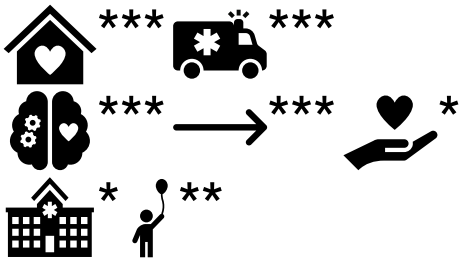
INTEGRATED HEALTH PARTNERS

215 S HICKORY ST
ESCONDIDO, CA 92025
Phone: (833) 867-4642
After Hours Phone: (833) 867-4642
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

INTEGRATED HEALTH PARTNERS

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (833) 867-4642
After Hours Phone: (833) 867-4642
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

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-Pre-Release Services and Participating in Warm Handoffs

INTERFAITH COMMUNITY SERVICES

550 W WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 489-6380
After Hours Phone: (760) 489-6380
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (760) 489-6380

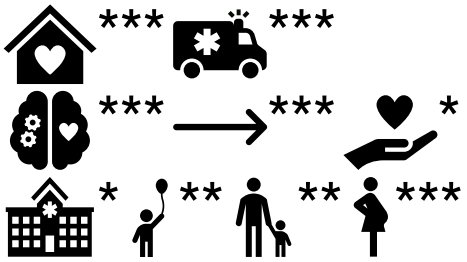
INTERFAITH COMMUNITY SERVICES

555 N CENTRE CITY PKWY
ESCONDIDO, CA 92025
Phone: (760) 489-6380
After Hours Phone: (760) 489-6380
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (760) 489-6380

FALLBROOK

INTEGRATED HEALTH PARTNERS

1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (951) 616-7026
After Hours Phone: (951) 616-7026
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: cmreferrals@chsica.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

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

(PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

IMPERIAL BEACH

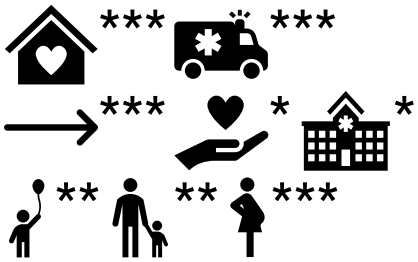
IMPERIAL BEACH HEALTH CENTER

949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
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

INTEGRATED HEALTH PARTNERS

949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
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 Services-Pre-Release Services and Participating in Warm Handoffs

LEMON GROVE

LA MAESTRA COMMUNITY HEALTH CENTERS

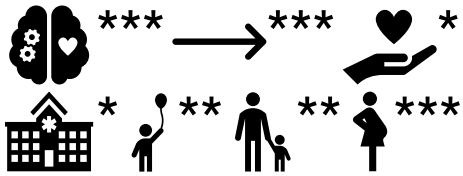
7967 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

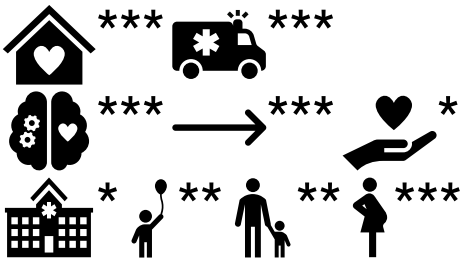
K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)



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
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

LOS ANGELES

EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
Phone: (323) 789-6492
After Hours Phone: (323) 789-6492
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

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

Phone: (323) 789-6492
After Hours Phone: (323) 789-6492
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (323) 789-6492

EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
Phone: (323) 276-6471
After Hours Phone: (323) 276-6471
Hours: M-F 7:30AM-4PM
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

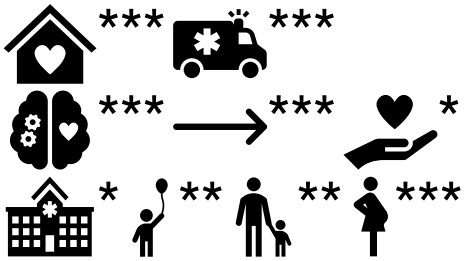
EXODUS RECOVERY INC

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
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

NATIONAL CITY

LA MAESTRA COMMUNITY HEALTH CENTERS

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
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

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

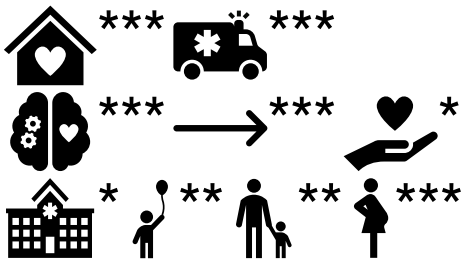
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

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
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

ORINDA

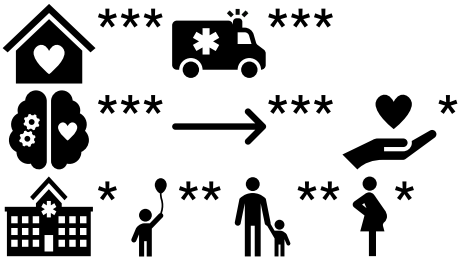
PATHWAY HOME SOLUTIONS INC

2 BIRCH CT
ORINDA, CA 94563
Phone: (209) 601-0734
After Hours Phone: (209) 601-0734
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
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 STOCKB

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

ROOK 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
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

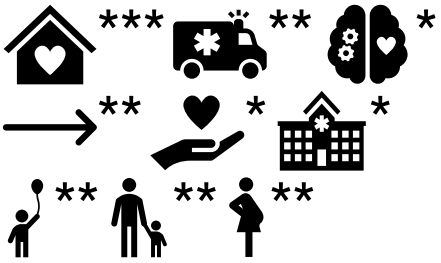
EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
Phone: (424) 282-2255
After Hours Phone: (424) 282-2255
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
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: network@fullcirclehn.org
Phone for New Referrals and Existing Patients: (888) 749-8877
Mailing Address: 2201 K ST;Sacramento;CA;95816
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

SAN DIEGO

*Adultos **Niños ***Adultos y niños

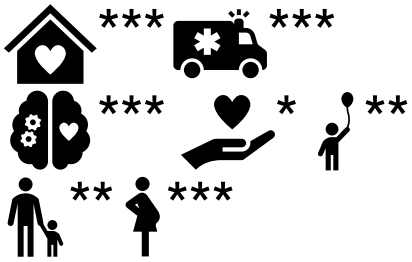
† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

HEALTHY CONNECT SAN DIEGO

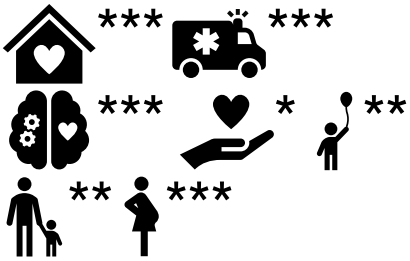
1202 MORENA BLVD
SAN DIEGO, CA 92110
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Hours: M-F 8AM-4PM
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

HEALTHY CONNECT SAN DIEGO

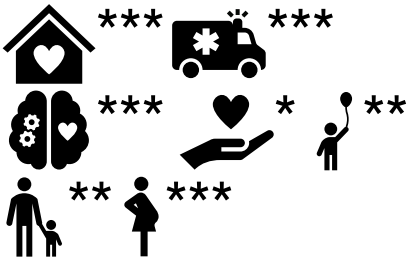
1202 MORENA BLVD
SAN DIEGO, CA 92110
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Hours: M-F 8AM-4PM
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619)

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

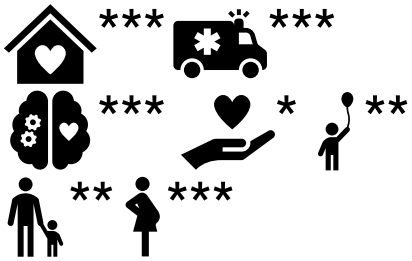
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

507-9333

HEALTHY CONNECT SAN DIEGO

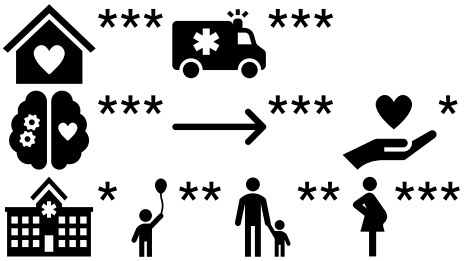
3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

FAMILY HEALTH CENTERS OF SAN DIEGO

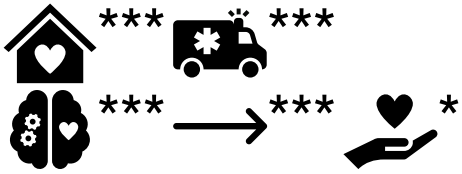
823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
Phone: (619) 876-4450
After Hours Phone: (619) 876-4450
Website: N/A
ECM Population of Focus:



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
Website: N/A
ECM Population of Focus:

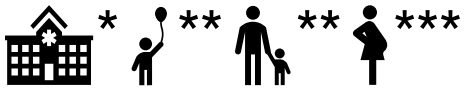


*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)



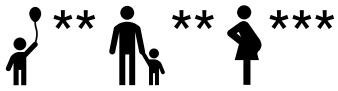
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org
Phone for New Referrals and Existing Patients: (619) 876-4450
Mailing Address: 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) 645-6405
Website: N/A
Community Supports Services: Recuperative Care (Medical Respite)
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 645-6405

INTEGRATED HEALTH PARTNERS

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
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 572169;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

HORIZON RECUPERATIVE CARE

3423 CHANNEL WAY
SAN DIEGO, CA 92110
Phone: (858) 326-1100
After Hours Phone: (858)

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

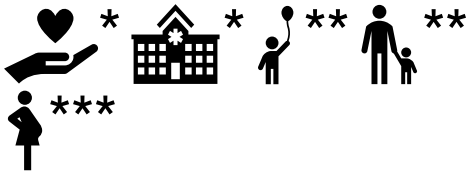
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

326-1100
Website: www.horizoncenters.org
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: (858) 326-1100

IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
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

CORRECTIONAL HEALTH TREATMENT CENTERS

402 W BROADWAY
SAN DIEGO, CA 92101
Phone: (888) 506-5609
After Hours Phone: (888) 506-5609
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM@CORRECTIONAL.HEALTH
Phone for New Referrals and Existing Patients: (888) 506-5609
Mailing Address: 473 S CARNEGIE DR STE 200;San Bernardino;CA;92408
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

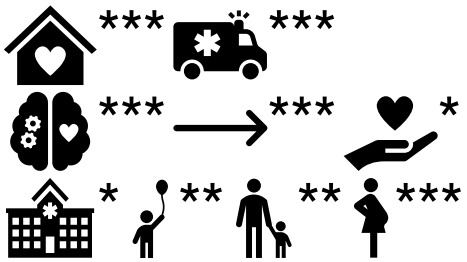
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

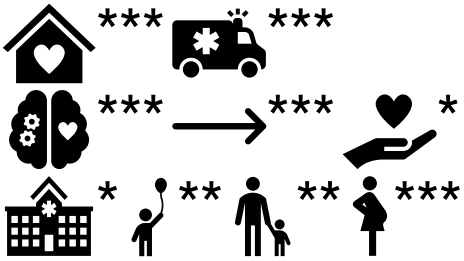
K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)



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
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

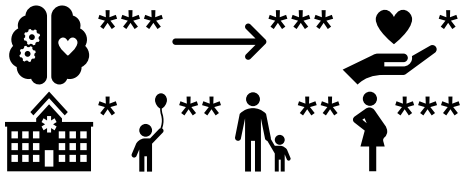
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

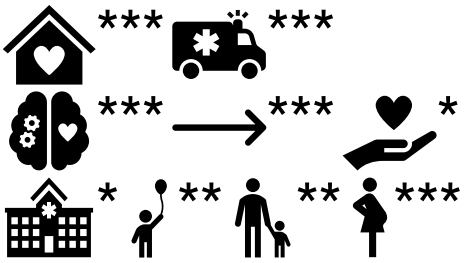


Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A

ECM Population of Focus:

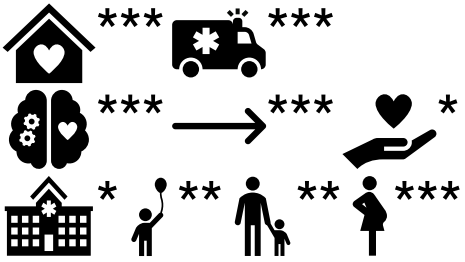


Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional 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

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A

ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Ex

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

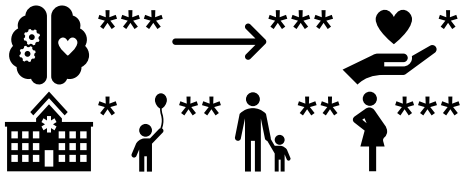
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

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

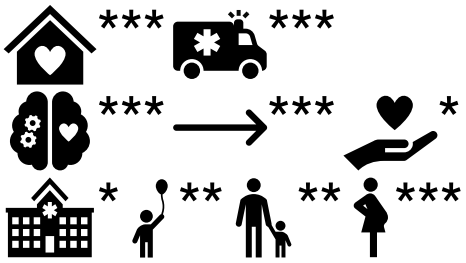
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:



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

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
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

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

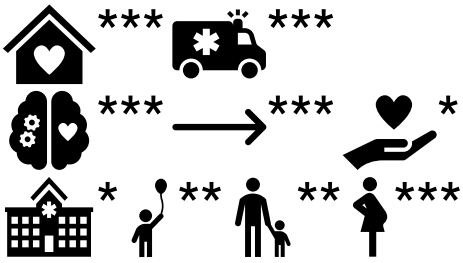
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

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

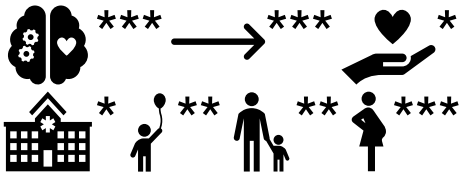
4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
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

*Adultos **Niños ***Adultos y niños

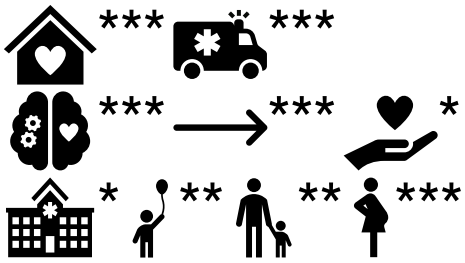
† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

CENTERS

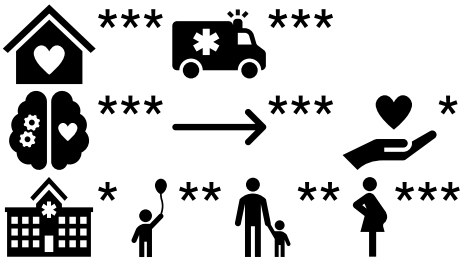
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Website: N/A
ECM Population of Focus:

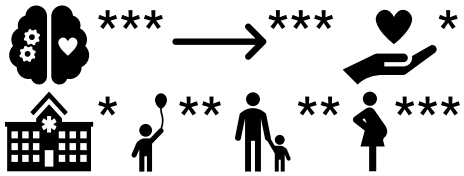
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

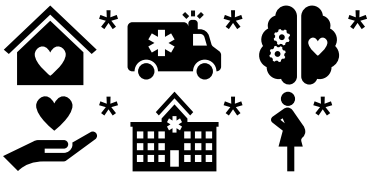
K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)



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

JEWISH FAMILY SERVICE OF SAN DIEGO

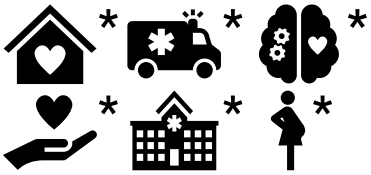
8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858) 637-3221
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Email for New Referrals and Existing Patients: calaim@jfssd.org
Phone for New Referrals and Existing Patients: (858) 637-3221

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858) 637-3221
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)

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

637-3221

INTEGRATED HEALTH PARTNERS

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
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@neighbor.org
Phone for New Referrals and Existing Patients: (619) 645-6405

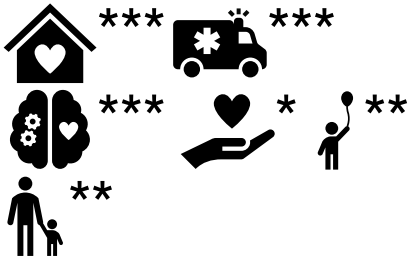
INTEGRATED HEALTH PARTNERS

3710 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (619) 542-4381
After Hours Phone: (619) 542-4381
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: bescalante@ihpsocal.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
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

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
Website: N/A
Community Supports Services: Day Habilitation Programs,Housing

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

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

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
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
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
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
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
Website: N/A
ECM Population of Focus:

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

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

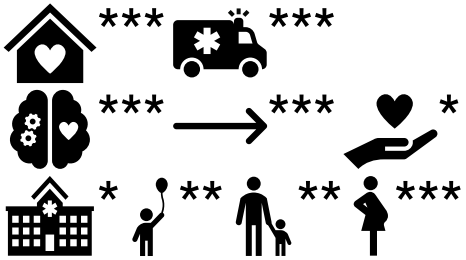
3960 HOME AVE
SAN DIEGO, CA 92105
Phone: (619) 233-6262
After Hours Phone: (619) 233-6262
Website: https://mamaskitchen.org/
Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 233-6262

MCALISTER INSTITUTE

2506 MARKET ST
SAN DIEGO, CA 92102
Phone: (916) 442-0277
After Hours Phone: (916) 442-0277
Website: N/A
Community Supports Services: Sobering Centers
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (916) 442-0277

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
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
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

2-1-1 SAN DIEGO

*Adultos **Niños ***Adultos y niños
† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

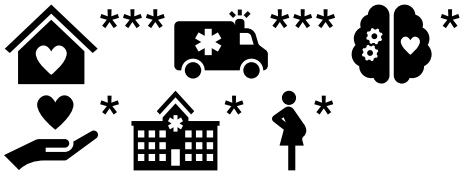
3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
Phone: (858) 380-5750
After Hours Phone: (858) 380-5750
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@211sandiego.org
Phone for New Referrals and Existing Patients: (858) 380-5750

SAN FERNANDO

PARTNERS IN CARE FOUNDATION

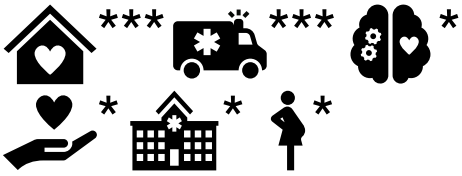
732 MOTT ST STE 150
SAN FERNANDO, CA 91340
Phone: (747) 500-4609
After Hours Phone: (747) 500-4609
Website: N/A
ECM Population of Focus:



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
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

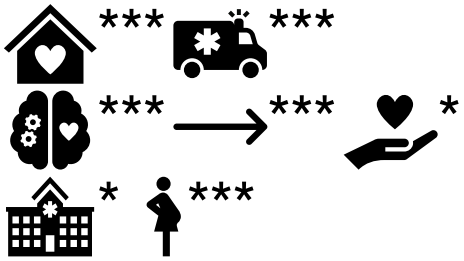
*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

After Hours Phone: (760) 566-1922
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 Existing Patients: (760) 566-1922
Mailing Address: PO BOX 572169;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

AMERICARE ADULT DAY HEALTH CARE CENTER

340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069
Phone: (760) 682-2424
After Hours Phone: (760) 682-2424
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: INASHTUT@AMERICAREADHC.COM
Phone for New Referrals and Existing Patients: (760) 682-2424

VAN NUYS

LIBERTANA HOME HEALTH OF SHERMAN OAKS

5805 SEPULVEDA BLVD STE 605
VAN NUYS, CA 91411
Phone: (818) 902-5000
After Hours Phone: (818) 902-5000
Website: N/A
Community Supports Services: Community Transition Services/Nursing Facilities Transition to a Home,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Nursing Facility Transition/Diversion to Assisted Living Facilities,Personal Care and Homemaker Services,Respite Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (818) 902-5000

VISTA

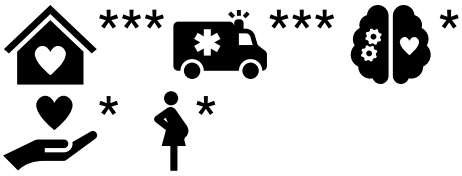
VISTA COMMUNITY

*Adultos **Niños ***Adultos y niños
† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.
La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

K. Otros proveedores de servicios (apoyo a la comunidad, gestión mejorada de la atención)

CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecmteam@vcc.org
Phone for New Referrals and Existing Patients: (760) 631-5000

EXODUS RECOVERY INC

550 W VISTA WAY STE 200
VISTA, CA 92083
Phone: (619) 321-5543
After Hours Phone: (619) 321-5543
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: (619) 321-5543

EXODUS RECOVERY INC

550 W VISTA WAY STE 200
VISTA, CA 92083
Phone: (619) 321-5543
After Hours Phone: (619) 321-5543
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: (619) 321-5543

*Adultos **Niños ***Adultos y niños

† Para obtener acceso a la gestión mejorada de la atención (ECM, por sus siglas en inglés) y al apoyo a la comunidad, los miembros necesitan una autorización previa y solo pueden recibirlos los miembros que cumplan criterios específicos de elegibilidad.

La medicina o salud de calle es la práctica de brindar atención de la salud a las personas sin hogar. Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

L. Centros de atención urgente

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO
License Number:
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: WC
N/A
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
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: WC
N/A
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
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: WC
N/A
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
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: WC
N/A
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
NPI: 1952995466
8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126
(858) 900-3550
(858) 900-3550
SU-SA 8AM-8PM
Accessibility: WC
https://www.afcurgentcare
.com/san- diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
NPI: 1952995466
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880

L. Centros de atención urgente

(858) 800-2880
SU-SA 8AM-8PM
Accessibility: WC
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
NPI: 1952995466
8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600
SU-SA 8AM-8PM
Accessibility: WC
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO
License Number:
NPI: 1952995466
1740 ROSECRANS ST
SAN DIEGO, CA 92106
(619) 790-7800
(619) 790-7800
SU-SA 8AM-8PM
Accessibility: WC
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

SANTEE

AFC URGENT CARE OF SAN DIEGO
License Number:
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: WC
N/A
Accepting New Patients: No

SAN DIEGO

MD TODAY URGENT CARE
License Number:
NPI: 1750644258
10605 SCRIPPS POWAY
PKWY STE C
SAN DIEGO, CA 92131
(858) 622-0554
(858) 622-0554
Spanish
SU-SA 8AM-8PM
Accessibility: P, EB, IB, E, R, WC, ME
www.mdtoday.com
Accepting New Patients: No

MD TODAY URGENT CARE
License Number:
NPI: 1275909434
3830 VALLEY CENTRE DR
STE 702
SAN DIEGO, CA 92130
(858) 720-0554
(858) 720-0554
Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
Accessibility: P, EB, IB, E, R, WC, ME
www.mdtoday.com
Accepting New Patients: No

CHULA VISTA

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

L. Centros de atención urgente

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM

L. Centros de atención urgente

M-F 4PM-10PM
SA 1PM-10PM
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

L. Centros de atención urgente

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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

L. Centros de atención urgente

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720

L. Centros de atención urgente

(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

L. Centros de atención urgente

FNDTN
License Number:
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: WC
N/A
Accepting New Patients: No

ESCONDIDO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

L. Centros de atención urgente

FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197

L. Centros de atención urgente

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

L. Centros de atención urgente

(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM

L. Centros de atención urgente

N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
N/A
Accepting New Patients: No

LA MESA

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

L. Centros de atención urgente

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

L. Centros de atención urgente

FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197

L. Centros de atención urgente

5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942

L. Centros de atención urgente

(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC

L. Centros de atención urgente

N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

L. Centros de atención urgente

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

L. Centros de atención urgente

License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT

L. Centros de atención urgente

CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375

L. Centros de atención urgente

(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

L. Centros de atención urgente

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
Accessibility: WC
N/A
Accepting New Patients: No

OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197

L. Centros de atención urgente

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

L. Centros de atención urgente

FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

L. Centros de atención urgente

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

L. Centros de atención urgente

(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
Accessibility: WC
N/A
Accepting New Patients: No

SAN DIEGO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC

L. Centros de atención urgente

N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

L. Centros de atención urgente

(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE

L. Centros de atención urgente

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

L. Centros de atención urgente

FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A

Si desea obtener información actualizada, comuníquese con Servicio al Cliente de Blue Shield Promise llamando al 1-855-699-5557, de lunes a viernes, de 8:00 a. m. a 6:00 p. m. TTY/TDD: 711. Visítenos en blueshieldca.com/promise/medi-cal. La información de este directorio de proveedores puede cambiar.

L. Centros de atención urgente

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: P, EB, IB, E, WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS

L. Centros de atención urgente

SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A

L. Centros de atención urgente

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:

NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123

L. Centros de atención urgente

(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:

L. Centros de atención urgente

NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
License Number:
NPI: 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: WC
N/A
Accepting New Patients: No

ESCONDIDO

RCH NORTH COUNTY URGENT CARE
License Number:
NPI: 1710065933
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
(760) 739-1543
(760) 739-1543
Accessibility: WC
N/A
Accepting New Patients: No

M. Lista de médicos de atención primaria

2

2-1-1 SAN DIEGO.....1895
24HR HOMECARE LLC.....1874

A

ABDALLAH, ALI. 289
ABDULRAHIM, AHMED. ...550, 551, 571
ABELL, GEOFFREY.....419
ABERCROMBIE, SHERI.1461, 1462, 1690
ABRAMSON, RACHEL. 419
ABSI, CHRISTIAN.....704
ABU-DOULEH, NADIA. 1084
ACEVEDO, SUSANA. 512
ACKROYD, ARCHIE. 1836
ACOSTA, ANGELICA. 639
ACOSTA-MARISCAL, JANICE. 1321
ADAMS, LAURA. 912, 1535
ADAMS, MONA. 1762, 1769, 1837
ADAMS, STEPHEN. 886, 1478
ADJAN, ROULA. 163, 420
ADLER, ERIC. 729, 1266, 1267
ADLOUNI, LOUBABA..... 420
AFC URGENT CARE OF SAN DIEGO. 1898, 1899
AFSHAR, KAMYAR. 1258
AGHILI, ROXANA.587, 700, 1026, 1368, 1369
AGING & INDEPENDENCE SERVICES.....1662
AGNIHOTRI, PARAG. 1266
AGUERO, AMETHYST.....184
AGUERO, PETER. 1516
AGUILA, YESENIA. 1084
AGUILAR, EDITA. 185, 186
AHMAD, AAKIF..... 1214
AISAGBONHI, OMONIGHO. .862, 1356
AKONG, KATHRYN. 1401
AKRAMI, KEVAN. 652
AKUTHOTA, PRAVEEN..... 1258, 1259
AL ANI, NAJWAN. 133, 134
AL AZZAWI, SARAH. 731, 1049
AL KHIAMI, BELAL. 817, 942, 1267, 1268
AL-BANAA, KADHIM. 796, 1236
AL-MSHHDANI, AYSER..... 385, 386
ALAGIRI, MADHU. 1406
ALANIZ, MATEO. 76
ALASSIL, SALLY. 357
ALBINO, NICHOLAS. 421
ALBRIGHT, KELSEY. 868, 1417
ALDANA, NANCY. 186
ALDERSON, CHEVON. 1219
ALDOUS, JEANNETTE.358, 497, 1244, 1607
ALEXANDER, BRENTON. 731, 1049
ALEXANDER, JAMIE. 1417, 1418
ALFONSO, ALVIN. 761, 1165
ALGHAMDI, ASMA. 134, 214
ALGRA, JEFFREY.....961, 1416
ALI, ABBAS. 520, 521
ALKATIB, RHONDA. 1361
ALLEN, AMY. 1663, 1664
ALLEN, ELIZABETH.....862, 1356
ALLEN, KATHERINE.564, 724, 936, 1084
ALLEN, RACHAEL. 839, 1323
ALLSUP, VICTORIA. 422
ALONZO, SHIRIN.....355, 356
ALOTAIBI, MONA. 813
ALSHAWABKEH, LAITH.741, 1069, 1070
ALSTEEN, STEPHANIE. 1085
ALVA, WENDY.....616
ALVARADO, EDMUND. 1418
ALVAREZ-ESTRADA, MIGUEL.290, 479, 480
ALWAHAB, AREEJ. 164
ALWASH, MUSTAFA. 146
ALYAS, ALISIA. 639, 640
AMANAT, SOROOSH. 77
AMANN, CHRISTOPHER.653, 768, 1192
AMARKARIAN, ARIEL. 541
AMAYA, RICARDO..... 602
AMBER HOME. 1655
AMBO, STANLEY. 537
AMBROSE, CHRISTOPHER. .560, 1640
AMERICARE ADULT DAY HEALTH CARE CENTER. 1661, 1896
AMINI, AFSANEH..... 1769
AMOS, MARIA. 1085
AMREEN HOME..... 1655
ANAND, GOBIND. 790, 1227
ANDAYA, MIKHAEL. 215
ANDER, AZIZ. 1581
ANDERSON, ELAINE.577, 631, 688, 930, 1235, 1236
ANDERSON, MANDY..... 504
ANDREE, GREGOR..... 422, 423, 1407
ANDREWS, BRAD. 1017
ANDRU HOME. 1654
ANG, LAWRENCE. 817, 1268
ANZA HOUSE. 1656
AOTO, KIM.1733, 1753, 1763, 1798, 1821, 1837
APPENZELLER, ERICA. 1081
APPLEGET, JOSEPH. 1166
APRIL, MONIQUE.....713, 714
AQUINO, FELINO.966, 967, 1085, 1086
ARAFAH, DEEMA. 1389
ARAIZA, ERNESTINA. 646, 1669
ARCE GOMEZ, LAURA..... 77
ARCEO, JACQUELINE. 1690, 1691
ARCHAMBAULT, CHRISTIAN. 424
ARCHIBALD, JOHN. 1781, 1837
ARELLANO, JACQUELINE.656, 746, 1081, 1082
ARENAS, CECILY. 1086
ARGOUD, GEORGES. 358, 359
ARHART, KESLEY. 556, 562, 1065
ARJONA, STEPHANIE. 541
ARLATA, TAMANTHA. 522
ARLINGHAUS, RENE. 1671
ARMANI, AVA. 678, 913, 1536, 1641
ARMEEN, GARY. 868, 1419
ARMENTA, JORGE. 640, 985, 1419
ARMSTON, LINDSEY. 564, 617
ARRIETA, IRIS.....1638
ARRIETA, NOEMI. 173, 480, 1605
ARTS, SERENA. 1087
ARUTYUNOV, BORIS.....1247
ARVIZU, MARGARITA. 1087
ASHAK, DANI. 664, 832, 1308, 1309
ASIMAKOPOULOS, FOTIOS. 796

M. Índice de proveedores de atención primaria

ASIS, STEPHANIE.....1753, 1770, 1798
ASLIAN, AZITA.....231
ASSADIAN, MEHRAK.....1180
ATIGA, SCHUBERT.505, 583, 584, 1609
ATMAR, AKMAL.....987
AUSTIN, ANDREA.....768, 1193
AUSTIN-PAGE, LUKAS.....1369
AVALLONE, THOMAS.....1799
AVILES, LEAH.....602, 603
AWDISHO, ALAN.....146
AWDYKOVYCH, MARTA.....424
AWWAD, REEM.....886, 1478
AYON MARTINEZ, CARLOS.....533
AYSON, NICOLE.....424, 425
AZIMI, AYSUN.....425

B

BACANI, AMY.....1675
BACHARACH, REBECCA.....290, 523
BAEZ, BEATRICE.....215, 216
BAGHOUMIAN, MARINEH.....1799
BAGRODIA, ADITYA.....927, 1562
BAHRAMZI, MARIA.....291, 292
BAI-TONG, SHIYU.....662, 823, 1279
BAILEY, JACOB.....883, 1472, 1473
BAILONY, AHMAD.....233
BAILONY, MOHAMMED.....232
BAIN, NATALIE.....134, 135, 292, 293
BAIOU, MOHAMED.....519, 520
BAISLEY, SHAWN.....552, 553, 705
BAKER, SHANNON.....1566, 1567
BAKER, TANYA.....1088
BALDERAS-MAGALLANES, RODOLFO.....107
BALDONADO, ANALICIA.....590, 591
BALDWIN, ANDREA.....991
BALDWIN, DONNA.....1041
BALIKIAN, PHILIP.....1044
BALL, SHELDON.....359, 360, 1247
BALL, STEPHEN.....905, 1516
BALLAS, JERASIMOS.....661, 821
BALLOUT, REEM.....681
BALTRUS, JUSTINE ANN.....1727
BALUCH, NARGES.....1047
BANDAK, DIANA.1733, 1753, 1763, 1770, 1785, 1799, 1800, 1822, 1837
BANGS, SASHA.....985
BANKS, SARAH.....1462, 1691
BANSAL, PREETI.667, 693, 945, 1022, 1324, 1763, 1770, 1838
BAQIR, HUMA.....1692
BARBADILLO, FERDINAND.....513
BARMAN, PRANAB.....801, 1240
BARNARD, LUKE.931, 983, 1754, 1800, 1822
BARNES, LAURA.....813, 1259
BARNES, RYAN.....1536
BARRY, JEFFREY.....768, 1193, 1194
BARSOTTI, ALEXANDRA.....761, 1166
BARTZ, BRYAN.....1517
BASS, GURGIANA.....1463, 1692, 1693
BAUM, PETER.....66, 67, 554
BAUMAN, LAURA.....1228
BAUTISTA, LUIS.....62
BAXTER, SALLY.....839, 1324
BAYAT, HAMED.....689, 1039
BAYLON, ALDO.....600, 1665
BEAUCHAMP-WALTERS, JULIA.....1407
BEAUDRY, AMANDA.....1770, 1838
BEAUMONT, THOMAS.....916
BECERRA SONGOLO, TOSHA.731, 1049
BECERRA, MAURA.....78, 575
BECHIS, SETH.....1562
BECKMAN, JESSICA.1733, 1754, 1763, 1771, 1785, 1800, 1822, 1823, 1838
BEGOVIC, ADNAN.....653, 941, 1260
BELANGER, TANYA.....1576, 1577, 1578
BELEN, NEZER.....617, 1088
BELL, JENNIFER.1687, 1688, 1730, 1731
BELL, TRACY.....293, 294, 1220
BELLA, ARCHIE.....229, 230
BELLINGHAUSEN, AMY.769, 1194, 1195
BEN-HAIM, SHARONA.560, 916, 1034, 1543
BENARD, ROBERT.....1088
BENCH, SHAWN.....1536, 1537
BERGEN, SOPHEA.....1419
BERGERON, PATRICK.....905, 906, 1517
BERGGREN, ERICA.....505, 506
BERGMARK, JAMIE.....1771, 1838
BERMAN, ZACHARY.....887, 1479
BERNADETT, ALEX.....1220
BERNETICH, MEGHAN.....1625
BERUMEN, JENNIFER.....1537
BHATIA, KARISHMA.....731, 1050
BHATIA, SHAGUN.667, 693, 945, 1023, 1325, 1764, 1771, 1839
BHATTACHARJEE, RAKESH.1401, 1402
BHUPATHIRAJU, NINA.....704
BIALOSTOZKY, MARIO.....1369
BICKLER, STEPHEN.....1552
BIFFL, SUSAN.....961, 1416
BIGELOW, ELSIE.....732, 1050
BIGELOW, SPENCER.....731, 1050, 1051
BILOTTA, NATALIE.....1089
BIMSTEIN, JAIME.....564, 967
BINDER, NICHOLAS.1734, 1754, 1771, 1801, 1823, 1839
BINETTE, DONYA.....991, 992
BIRGERSDOTTER-GREEN, ULRIKA.....1066
BIRS, ANTOINETTE.....741, 1070
BISHOP, MELISSA.....294
BISSET, LOGAN.....887, 1479
BIVER, LAURA.....1309
BJORNSON, MICHELE.....1626
BLACK, NICHOLAS.....769
BLACKWELL, CHRISTOPHER.887, 1480
BLAKE, GARY.....386, 387, 1309
BLAKESPEAR, JEREMY.....1032
BLASKIEWICZ, DONALD.....561, 916
BLESSING, JOSHUA.....552, 555
BLISS, MORGAN.669, 697, 947, 1025, 1339
BLOCKER, NIRIT.....1517, 1518
BLUM, RICHARD.....1066
BO, CHRISTOPHER.....559
BOCK, MATTHEW.....1363
BOCKHORN, LAUREN.....919, 1546
BODIFORD, SAMANTHA.....294, 295
BOECK, CARL.....1839

M. Lista de médicos de atención primaria

BOEHMER, ALEXANDRA. 906, 1518
BOEING, KRISTINA. 1166
BOHRER, NICHOLAS. 984
BOND, KIMBERLEE. 1322
BONE, SAMUEL. 887, 1480, 1481
BONSU, BEMA. 233
BOOTH, CHRISTOPHER. 879, 1675
BORDIN-WOSK, TALYA. 804, 1247
BORJON, AGUSTIN. 711
BOROK, ZEA. 814, 1261
BORQUEZ, ALEJANDRO. 949, 1363
BORSAN, COSMIN. 481
BORTNER, ADAM. 1244
BORTZ, PASCAL. 616, 913
BOSTON, LAURA. 570, 1175
BOUTELLE, AMY. 747
BOYD, LISA. 868, 1420
BOYS, JOSHUA. 925
BRADY HOME. 1654
BRADY, KATELYN. 748
BRADY, PATRICIA. 295
BRANCH, CODY. 888, 1481
BRANCH, LAUREL. 790, 791, 1228
BRAZIER, SETH. 598, 1042
BREEDLOVE, AMANDA. 1693
BRENNER, EINAT. 879, 880, 1463, 1676, 1693
BRIED, JAMES. 1044
BRIGGS, BENJAMIN. 1394
BRION, SONJA. 171
BRODSKY, MARK. 295, 296
BROOME, HELEN. 863, 1356
BROUDY, ABRAHAM. 118
BROUHARD, MARIE. 541
BROWN, BRANDON. 135, 296
BROWN, DARCIE. 1693
BROWN, REGINA. 1017, 1580
BROWN, TERESA. 888, 1481, 1482
BRUBAKER, ALEAH. 1537, 1538
BRUECKNER, TAMMIE. 869, 1420
BRUHN, JOSHUA. 135, 136
BRYDEN, ALLISON. 1089
BRYL, AMY. 1370
BUCKNER, JOSEPH. 1613
BUECHNER, CHARLENE. 110, 156, 157, 207, 208, 387, 388, 389, 390, 391, 526
BUENROSTRO, CHRISTINA. 748, 1089
BUI, ANH. 1090, 1091
BUI, CHRISTOPHER. 1546
BUI, JACK. 863, 1357, 1359
BUI, JONATHAN. 663, 1289, 1290
BUI, QUAN. 818, 1268
BUI, TINA. 1801
BUKATA, SUSAN. 920, 1546, 1547
BULOW, KWI. 1607
BUNOSKY, ABIGAIL. 906, 1518
BURGAMY, ELIZABETH. 73
BURNS, DELLA. 1091
BURROWS, WILLIAM. 1188
BURTON, JALISA. 541
BURTON, LUCAS. 297
BUTLER, KIM. 1754

C

CABALLERO, JAMES. 977, 978, 1180, 1181
CABALLERO, NOE. 1694
CABANISS, SCOTT. 732, 1051
CABRAL, ALEJANDRA. 1568
CABREJOS, CLAUDIO. 1726
CACHAY, EDWARD. 1248
CAGE, DORI. 1543
CALAME, ANTOANELLA. 1188
CALHOUN, CHANELLE. 264
CALIFANO, JOSEPH. 847, 848, 1339, 1340
CALLAGHAN, KATHRYN. 1694
CALLAWAY, MALLORY. 1514
CALVERT, ROBERT. 552, 555
CAMERON, IAN. 1519
CAMERON, MELISSA. 1407
CAMPA, PATRICIA. 646
CAMPBELL, BRIANNA. 216, 298
CAMPBELL, PATRICK. 705
CAMPBELL, SARA. 1370
CAMPOS, MELISSA. 78, 79, 481
CAMPOS, PRISCILLA. 67
CANDELARIA, AMBER. 1785, 1840
CANO, SARAH. 1051
CANTU, ALICIA. 1408
CANTU-REYNA, GUILLERMO. 981, 1290
CAPETANAKIS, ELENI. 118
CAPOZZI, JENNIFER. 748, 1091
CARAWAY, ARLENE. 542
CARAZO, MATTHEW. 742, 1070, 1071
CARDINELL, ANNA. 656, 1626
CARDONES, ARTHUR. 523, 524
CARETHERS, JOHN. 791, 1228
CARLO HOUSE. 1654
CARLSON, BLAKE. 888, 1482
CARMONA, RUBEN. 601, 934, 1476
CARNEY, AMY. 681
CARPENTER III, ROBERT. 147
CARR, ANGEL. 542
CARR, MIANDA. 506
CARRAGEE, CATHERINE. 1221
CARRERA, JORGE. 184
CARRIEDO-CENICEROS, MARIA. 216, 217, 298, 482
CARRILLO, MARITZA. 574
CARRION-GELABERT, ANA. 565, 618
CARROLL, JEANNE. 1279
CARROLL, JOSEPH. 1568, 1569
CARROLL, MAYA. 992
CARSON, LATISA. 506, 507
CARSWELL, AIMEE. 888, 1482, 1483
CARTER, LEXXUS. 542
CARTER, NATASHA. 1188, 1189
CARTWRIGHT, VICTORIA. 1031, 1405
CARVALHO, DANIELA. 947, 1340
CASA PACIFICA ADHCC. 1660
CASAS, TAMARA. 769, 770, 940, 1195
CASILLAS BERUMEN, SERGIO. 615, 711, 1538
CASTANER, ZALYA. 174
CASTELLANOS, ARIANA. 1694
CASTELLANOS, JOEL. 740, 1064
CASTELLANOS, LUIS. 1071, 1072
CASTELNOVI, CLAUDIA. 425, 426
CASTILLEJOS, DAVID. 1742
CASTILLEJOS, MARIA. 1742
CASTILLO, PATRICIA. 1420, 1421
CASTILLO, STEPHANIE. 482
CASTLEBERRY, DANI. 1664, 1665

M. Índice de proveedores de atención primaria

CASTRO, SHANE. 1676, 1695
CAZARES, DARIANA. 1695
CELAYA, PATRICIA. 601, 1666
CELESTIN-RAMSEY, AKANKE. 1092
CENTENO QUIEL, JULISSA. 542
CERNELC-KOHAN, MATEJKA. 673, 674, 1402
CEVALLOS, JAMES. 217
CHA, DANIEL. 1739
CHACO, MEGHAN. 1092
CHAIN, PEI CHI. 1840
CHAIT LLAMAS, LWBBA. 513
CHAKRABARTI, PRIYA. 110, 111, 157, 208, 391, 392, 393, 527
CHALISON, DANIEL. 761, 1167
CHALMERS, VIRGINIA. 1688
CHAMAPAGNE, ALLISON. 1181
CHAMBERS, KATRINA. 657
CHAN, ANDY 360
CHAN, CHI-BEW. 732, 1052
CHAN, KWOK FUNG. 1742, 1755
CHANDRADAS, SAJIV. 360, 361
CHANG, JEREMY 796
CHANG, JOHANNA. 674, 1405
CHANG, TOM. 1764, 1772, 1801
CHASE AVENUE FAMILY HEALTH CTRS INC. 33
CHASE AVENUE FAMILY HEALTH CTRS INC, ... 143
CHASE, AVA. 1093
CHAU, JOHN 361
CHAU, PETER. 1363
CHAU, VIVIAN 1772
CHAUSSE CASTRO, EKATERINA. 1599, 1600
CHAVEZ SANTOS, MARIA. 557
CHAVEZ, ALEXANDRIA. 1093
CHAVEZ, LUIS. 576, 631, 1229
CHEATHAM, BRITTANY. 1093
CHEHABI, HAZEM. 831, 1307
CHEN, ALICE. 770, 789, 1195, 1196, 1221, 1222
CHEN, ANDREW 689, 1038
CHEN, CHUNG-JIAH 1237
CHEN, EILEEN. 426
CHEN, JAMES 362
CHEN, JENNIFER. 426, 427
CHEN, LESLIE 1840
CHEN, TONY. 1562
CHEN, TSUH-YIN. 107, 108, 578
CHEN, YU-WEI. 797, 1237
CHENG, BRANDON. 603, 604, 725, 987
CHENG, GEORGE 804, 1248
CHENG, ISABEL 705
CHENG, KAREN. 889, 1483, 1484
CHENG, SARAH. 840, 1325
CHENG, YU-TSUN. 965, 1547
CHERRY, REENA. 869
CHERY, FARAH. 79, 80
CHESHER, NICHOLAS. 880, 1463, 1677, 1695
CHEW, WESLEY. 1802
CHEWNING, RUSH 1484, 1485
CHIARAPPA, FRANK. 920, 1547
CHILAKA, SAMUEL. 992, 993
CHILDERS, DIANA. 802, 803, 1243
CHIN, BRIAN. 770, 1196
CHIRIBOGA, MEGAN. 715, 716, 994, 995, 1626, 1627
CHISHOLM, KAREN. 1742
CHISWICK, GARY. 1584, 1585
CHOATE, BERNADETTE. 1094
CHOI, JIHOON. 920, 1547
CHOI, NATHALIE. 765, 1175, 1176
CHOI, SHARON 797
CHONG, AMY 1408
CHONG, TAMMY. 1734, 1755, 1764, 1772, 1786, 1802, 1823, 1824, 1841
CHOO, SUN. 1027, 1370, 1371, 1395
CHOU, BILL 205, 299, 300
CHOU, SUSANNA. 483, 1606
CHOUEIRI, MICHEL 797, 1237
CHOW, BYRON. 187
CHRISTENSEN, DIANA. 889, 1485
CHRISTY, TYLER 995, 996, 997
CHU, CHRISTOPHER. 672, 703, 957, 1030, 1391
CHULA VISTA FAMILY HLTH CTR. 31
CHULA VISTA FAMILY HLTH CTR, ... 103, 104
CHUNG, ALLEN. 1841
CHUNG, PETER. 604, 726, 988
CHUNG, SUEMIN. 1094
CHWA, JEFFREY. 615
CIAFONE, JOANNA. 1094, 1095
CIDAMBI, EMILY. 1035, 1548
CIRIELLO, JONATHAN. 889, 890, 1485, 1486
CLARK, DONIA. 300, 301
CLARY, BRYAN. 913
CLEMENT, LUIS. 1464, 1695
COBB, DAMON. 1040
COBIAN, VANESSA. 175
COBLENTZ, IAN. 732, 1052, 1053
COCKERHAM, KIMBERLY. 1751, 1803
CODEN, DANIEL 1786
COFFEY, CHARLES. 848, 849, 1341
COHEN, CARA. 187
COHEN, MARGO. 1096
COLEMAN, ANDERSEN. 73
COLEMAN, BROOKE 1781, 1841
COLEMAN, LORI. 602, 709, 934, 1476
CONE, STEPHANIE. 164, 165, 234, 427
CONNER, PAMELA. 748, 749, 1096
CONNOR, CAROLINE. 749, 1096, 1097
CONNOR, JEFFREY. 1782
CONRAD, HEATHER 1371
CONRAD, SIMON. 761, 1167
CONROY, ERIN 463, 464, 465
CONSTANTINO, STEPHANIE 524
CONTAG, ALEC 483, 484
CONTRERAS, LORETTA. 1421, 1422
COOK, LEANNE. 771, 1197
COOK, ROSALINE. 542, 543
COOKISH, DAVID 869
COOPER, MICHAEL. 1782, 1842
CORBETT, BRYAN 771, 1197
CORBIN, DAVID. 521
CORDES, WILLIAM. 428
CORDOBA, MIGUEL. 118
CORLEY MILNER, JANTENEE. 543
CORMAN, DANIEL 136, 301
CORNEJO PINA, RAQUEL. 80

M. Lista de médicos de atención primaria

CORONADO, MYRNA. 68, 484
CORREA, ANN MARIE. 1097
CORRECTIONAL HEALTH TREATMENT CENTERS. 1885
CORTES, ALEJANDRO. 921, 1548
CORTEZ, AARON. 1519
CORTEZ, JAIME. 1634
CORY, ALLISON. 239, 240
COSINO, ANJELICA THERESE. 1097
COSTELLO, MARK. 1519
COTTER, BRUNO. 1072, 1073
COULLAHAN, JESSICA. 188
COX, VICTORIA. 175
COYNE, CHRISTOPHER. 772, 1197
CRAMER, SCOTT. 890, 1486
CRANDAL, BRENT. 880, 1677
CRANE, CLARKSON. 868, 1399, 1400
CRAWFORD, ELWARD. 928
CRAWFORD, MARK. 1097, 1098, 1099
CRAWFORD, MICHAEL. 588, 700, 1027, 1371, 1372
CRAWFORD, THELMA. 543
CRAWFORD-DAY, ANN. 1727
CRAYCHEE, LEO. 534
CRIPE, TAYLOR. 870
CRISOL, CAROLINE. 1696
CROSS, JOHN. 1320
CROUCH, DANIEL. 1261
CRUZ RODRIGUEZ, JOSE. 818, 1269, 1270
CRUZ, GUADALUPE. 1669
CRUZ, MICHAEL. 574, 575, 1605
CSAPOCZI, PETER. 362
CUMMINGS, GEORGE. 605, 647, 1520
CUMMINS, ANDREW. 363
CUNNINGHAM, ISIS. 968
CUNNINGHAM, STEPHANIE. 724
CURET, ZULMA. 188, 273
CURLEY, EDWARD. 265
CURRAN, BRIAN. 733, 1053
CYMBALUK, ANNA. 1389
CYPRO, ALEXANDER. 884, 1473

D

DABU, LISA. 234
DAHMS, ERIC. 363, 364
DAIRO, BRANDON. 562, 680, 991, 1064
DALAL, PRITHA. 961, 1416
DALUGDUGAN, ESTHER. 485, 1606
DAMANI, SAMIR. 742, 818, 966, 980
DANG, ERIC. 1520
DANG, KAYLEE. 1521
DANG, TIMOTHY. 767, 1189
DANIELS, SARAH. 265
DAO, MARC. 1637
DAPPEN, AMANDA. 301, 302
DARWISH, ALEX. 733, 1053
DAVE, SHRAVAN. 791, 1229
DAVENPORT, LARIS. 761, 1168
DAVID, MARVIC. 1422
DAVIDSON III, JOHN. 598, 599, 987
DAVIES, SUMMER. 749, 1099
DAVIS, CHARLES. 485
DAVIS, CHRISTOPHER. 698, 950, 1364
DAVIS, DEIRDRE. 302
DAVIS, JADE. 1842
DAY, CHRISTOPHER. 234, 235
DAZO, LESLIE. 1671
DE DIOS, SARAH JANE. 565, 618, 750, 1099
DE LA CRUZ, ALEKSANDRYA. 565, 618
DE LA ROSA, JOSE. 498
DE MIK, TRAVIS. 111, 157, 158, 209, 394, 395, 396, 527, 528
DEACON, CASSIE. 1696
DEAN, MOENA. 1734, 1755, 1764, 1786, 1803, 1824
DEANER-HARRINGTON, SHERRY. 1743, 1755, 1821
DECAMPS, SCARLETT. 787, 1214
DECARLI, TASIA. 997, 998
DECONDE, ADAM. 849, 850, 1342
DECOOL, TAYLOR. 1100
DEIS, CRISTINA. 81
DEISS, ROBERT. 1245, 1248
DEJULIO, PAUL. 741, 1064, 1065
DEL CAMPO CASANELLES, MIGUEL. 1235
DEL RE, AMANDA. 196
DEL RE, ANGELO. 1372
DEL ROSARIO, GELEN. 981, 982
DEL ROSARIO, PAMELA. 823, 1280
DEL VECCHIO, MEGAN. 1100
DELCORE, LAURA. 665, 832, 1309, 1310, 1311
DEMASCO, MICHAEL. 870
DEMESSIE, RAHEL. 1100, 1101
DEMLINGER, GLENN. 1868
DEMOOR, PATRICIA. 870
DENLINGER, TAMARA. 682
DENTICO-OLIN, MARC. 1338, 1339
DERISSI, DANA. 1422
DEUTSCH, KAREN. 1101
DEVERA, GEMMIE. 588, 951, 1372
DEWOLF, SEAN. 814, 1262
DHARKAR-SURBER, SAPNA. 968, 1102
DHILLON, NAVNEET. 1198
DHILLON, RACHEL. 1677
DI FRANCO, MATTHEW. 119, 120
DIAL, PEI SHIH. 906, 907
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC. 48
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC, ... 341
DIAZ, JAENAI. 1697
DIAZ, VICTOR. 762, 1168
DICKERSON, ANDREW. 673, 703, 958, 1391
DIEP, KEVIN. 364
DIJANIC, CHRISTOPHER. 921, 1548
DILLON, BENEDICT. 498, 499
DILLON, MAYRA. 217, 218
DIMAIRA, FRANCESCA. 750
DINH, MY. 507, 508, 1610
DISTEFANO, KIMBERLY. 656, 746, 747, 1082
DIVINE BIRTHING SERVICES LLC, ... 543
DIXON, SARAH. 428
DJEKIC, KRISTINA. 805, 1248
DO, STEPHANIE. 952, 1373
DOAN STEPHENS, CRYSTAL. 356, 1408, 1409
DOAN, ANGELA. 1102
DOAN, CHINH. 1045

M. Índice de proveedores de atención primaria

DODGE, JOHN..... 364, 365
DOKICH, SRETENKA.....199, 514, 1612
DOLLAND, STEVEN..... 762, 1169
DOMINGUEZ, DENNIS..... 137
DON, MICHELLE..... 863
DONALDSON, CHADWICK..... 559
DONG, TAMMY..... 120
DONOFRIO-ODMANN, JOY..... 1373
DORINGO, ELAINIE..... 121
DORN, TIA..... 205, 206
DOROS, JOSHUA..... 1198
DORUELO, ASHLEY.112, 158, 209, 396, 397, 398, 528
DOSHI, AMI..... 1409
DOSHI, NEELIMA..... 189
DOSS, KATIE..... 1697
DOVE, KATHERINE..... 1291
DOWNEY, NANCY..... 618
DOWNTOWN FAMILY CTR AT CONNECTIONS..... 55
DOWNTOWN FAMILY CTR AT CONNECTIONS, ... 341
DRAME, SALWA..... 1423
DRIEBE, AMY MARIE.665, 833, 1311, 1312
DRISCOLL, KARRIE ANNE..... 751, 1103
DRISCOLL, SUSAN..... 619, 969
DROKER, BRIAN..... 558
DU, SARAH..... 1423
DUARTE, KRISTEN..... 880, 881, 1677
DUBE, BIANCA..... 62, 63
DUMMER, KIRSTEN..... 950, 1364
DUNN-PIRIO, ANASTASIE..... 1291, 1698
DUONG, CHERYL..... 1782, 1842
DUONG, MAI..... 147
DUONG, NGHI..... 696, 844, 1335, 1336
DURAN, EDWARD..... 655, 742, 1073
DURNAN, CASSANDRA.615, 710, 1529, 1530
DUSTIN, ADAM..... 677
DWIGHT, KATHRYN..... 922, 1549
DWYER, ERIN..... 657, 1103
DY, DIANE..... 82
DYER, SHARON.1734, 1756, 1765, 1786, 1803, 1804, 1824, 1825, 1842
DZIEGIELEWSKI, CLAUDIA.792, 1229, 1230

E

EAGLE, SONJA..... 772, 1198
EARLES, LYDIA..... 557, 563, 1065
EARLEY, SAMANTHA..... 1410
ECKENROTH, SAGE..... 1045
ECLARINO, GALELEO..... 1103
EDMONDS, ERIC..... 712, 1549
EDNACOT, KARYNNE..... 1104
EGAN, KAITLYN..... 881, 1678
EICHENFIELD, DAWN..... 1368
EISENSTEIN, SAMUEL..... 1532
EKANAYAKE, PREETHIKA..... 1215
EKHOLM, JANNA..... 1176
EKPENYONG, ATIM..... 1373
EL CAJON ADHC..... 1658
EL-GHONEIMY, AHMED..... 365
ELLEDGE, LINDSAY..... 1678
ELSTER, JENNIFER..... 1395
EMERUWA, UKACHI..... 821, 1276
EPPERSON, KATRINA..... 1400
ERAZO, LIGIA..... 543
ERICKSON, LISA..... 1104
ESCONDIDO FAMILY HEALTH CENTER..... 35
ESCONDIDO FAMILY HEALTH CENTER, ... 181
ESKANDER, RAMEZ.660, 796, 1019, 1636
ESPERANZA, MELIZZA..... 1698
ESPINOSA-SILVA, YAMINAH.242, 243, 244, 534
ESTAVILLO, SAUL..... 1698
ESTEINOU, ENRIQUE..... 1627, 1628
ESTRADA, ALLISON..... 82, 83
ESTRADA, JOHANNA..... 486
EVERETT, ELIZABETH.716, 717, 718, 999, 1000
EXODUS RECOVERY INC.1878, 1879, 1881, 1897

F

FADARE, OLUWOLE..... 860, 1354
FAIRBANKS, TIMOTHY.679, 964, 1036, 1539
FALLBROOK FAMILY HLTH CTR.37, 38
FALLBROOK FAMILY HLTH CTR, ..194
FAMBRO, CYNTHIA..... 302, 303, 1222
FAMILY HEALTH CENTERS OF SAN DIEGO..... 1883, 1884
FAMILY HEALTH CTR IBARRA..... 49
FAMILY HEALTH CTR IBARRA, .341, 342
FAMILY HEALTH CTR OF SD- ELM ST. 56
FAMILY HEALTH CTR OF SD- ELM ST, ... 342
FAMILY HEALTH CTR SAN DIEGO-OAK PARK..... 52, 53, 54
FAMILY HEALTH CTR SAN DIEGO-OAK PARK, ... 342, 343
FAMILY HEALTH CTR SD NATIONAL CITY..... 39
FAMILY HEALTH CTR SD NATIONAL CITY, ... 226
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL..... 47
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL, ... 343
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE..... 47
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE, ... 344
FAMILY HLTH CTR SAN DIEGO-BEACH AREA..... 52
FAMILY HLTH CTR SAN DIEGO-BEACH AREA, ... 344
FAMILY HLTH CTR SAN DIEGO-EL CAJON..... 32
FAMILY HLTH CTR SAN DIEGO-EL CAJON, ... 143
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC..... 31, 32
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC, ... 104
FAMILY HLTH CTR SD HILLCREST. 49

M. Lista de médicos de atención primaria

FAMILY HLTH CTR SD HILLCREST, ... 345
FARBER, EMILY. 838
FARRIS, AMANDA. 762, 1169
FATHER JOES VILLAGES. 1884
FATLAND, SARAH. 244, 245
FAZELI, SOUDABEH. 890, 1487
FEJLEH, ASHLEY. 733, 1053
FEJLEH, MOHAMMAD PHILLIP. 792, 793
FELD, KEREN. 1105
FERMIL MITCHELL, YVONNE. 1105
FERNANDEZ LEYVA, JUAN CARLOS. 74, 75
FERNANDO, JENNIFER. 969
FERRAIOLO, NATALIE. 175, 176, 202, 203
FERRANDO, CECILE. 833, 1312
FEUVRIER, ARIANA. 805, 1249
FIELDING, JOSEPH. 1521
FINCH, CHRISTINA. 1403, 1529
FINK, PATRICK. 1424
FINN, DAPHNA. 1678
FIRESTEIN, CATHERINE. 803, 1243
FIRESTONE, MICHELLE. 1464, 1699
FISHER, JAY. 1373
FISHER, JENNIFER. 1515
FISHER, SLOANE. 1105
FISHMAN, ELENA. 429
FLEMING, DAVID 937
FLEMING, SARAH. 580, 1280
FLEMING, TARA. 165, 166
FLETCHER, EMILY. 121
FLEWELLING, CAITLIN. 1727
FLORES, BERTHA. 1569
FLORES, ERNEST. 121
FLORES, JOE. 303, 304
FLORES, MARIBEL. 83, 84
FLYNN, DANIELLE. 1598, 1726
FOLSOM, DAVID. 1291, 1292
FONTANA, LOUIS. 1728
FONTANILLA, ROBERT. 705
FOR THE VILLAGE INC, ... 543
FORCIER, NANCY. 891, 1487, 1488
FORSMAN, SHANA. 675
FORTUNE, ERIN. 429, 430
FORZANI, CHRISTINA. 1464, 1699
FOSTER, BRITTLYN. 1671
FOWLER, KATHRYN. 891, 1488
FOX, KENNETH. 1560
FOX, SUTTON. 805, 1249
FRANK, ETHAN. 670, 697, 948, 1025, 1343
FREEMAN, WANDA. 1570, 1571
FRENETTE, CATHERINE. 366
FRESNO, BLANCA. 121, 235
FRIEDMAN, JAIME. 430
FRUGONI, GINA. 1313
FRY, LIANE. 1699
FU, KATHERINE. 1672
FUJII, CINDY. 514, 1612
FULL CIRCLE HEALTH NETWORK. 1881
FUNARI, CHRISTOPHER. 706
FUNDINGSLAND, BRENT. 733, 1054

G

GAFFEY, ANN. 915
GAINOR, GRETCHEN. 201
GALLAGHER, JEFFERY. . 558, 577, 1236
GALLARES, DANIEL. 207
GALLEGOS, CYNTHIA. 1105, 1106
GALLO, PHILIP. 1624, 1625
GANDHI, SHEETAL. 201
GANESAN, ANUSHA. 1395
GANTA, SRUJAN. 1560
GARCIA CABRERA, ANA. 1539
GARCIA, CALVIN. 762, 1169
GARCIA, CATALINA. 619
GARCIA, DEANA. 1424
GARCIA, JOHNNY. 619, 620, 1106
GARCIA, KARLA. 85, 575
GARCIA, RAFAEL. 122, 235
GARCIA, RICHARD. 1699
GARCIA, ROSEMARIE. 1670
GARCIA, TEDAYSHIA. 1600
GARFF, KEVIN. 1864
GARGANO-CAMPA, NICOLE. 682
GARRETT, RILEY. 734, 1054
GEBAUER, HEATHER. 870, 1425
GEHR, MARC. 366, 367
GENG, BOB. 1361, 1362
GENOVESE, KELLY. 1000
GEORGE, BRUCE. 1783, 1869
GEORGE, JOSE. 922, 1550
GEORGE, KENDALL. 1783, 1868
GEPSHTEIN, YANA. 1176
GERST, SCOTT. 891, 1489
GERWER, JOHANNA. 367
GHAHREMANI, SIMIN. 122, 123, 236
GHASSEMLOU, DANIELLE. 706
GHEBRENDRIAS, SELEMAWIT. 821, 822, 1276, 1277, 1278
GHOLIPOUR, TAHA. 827, 1292
GI, HUNG. 591, 592, 1613
GIAMONA, KRISTEN. 1465, 1700
GIANG, STEVEN. 1843
GILANI, SAPIDEH. 850, 851, 1343, 1344
GILROY, LAURA. 1673
GIOVANNETTI, ERIN. 751
GIRKIN, CHRISTOPHER. 840, 841, 1325, 1326
GISH, ROBERT. 631, 632, 979, 980, 1240, 1241
GLEASON-ROHRER, GWEN. 304
GLENN, TARA. 1280
GOEB, YANNICK. 923, 1550
GOGGIN, SAMANTHA. 431
GOH, REGINE. 734, 1054, 1055
GOLD, JEFFREY. ... 691, 944, 1292, 1293
GOLDEN LIFE ADHC. 1659
GOLDFINGER, SARAH. 1107
GOLDING, IAN. 1364
GOLDMAN, DAVID. 584
GOLDSTONE, ADAM. 1773
GOLU, CRISTIANA. 1606
GOMEZ, DANIELA. 508, 509, 1610
GOMEZ, DENISE. 261, 262
GOMEZ, JUANITA. 678, 1465, 1670, 1700
GOMEZ, LESLIE. 751, 752, 1107, 1108
GONZALEZ, JUSTINE ARIEL. 647
GONZALEZ, LISA. 763, 1170
GOODWIN, RACHEL. 766, 1177
GORDON, BRENT. 1365
GORDON, CHRISTOPHER. 137

M. Índice de proveedores de atención primaria

GORDON, EMILE.....891, 892, 1489
GORGES, RANDA.....148
GORHAM, LAURA.588, 700, 1027, 1374
GOSHEN, KIRSTEN.....752
GOSMAN, AMANDA.....1553
GOUGH, ELIZABETH.....544
GOULD, HILARY.....601, 1666
GOWDA, ASHWIN.....653
GOYAL, NIDHI.....1392
GRACE HOUSE.....1656
GRACIA, MICHAEL.....1399
GRANADA, STEVE.....552, 555
GRANT, PERRIETTE.....544
GRANT, REBEKAH.....398, 399
GRAVES, JENNIFER.....1306
GRAY, IGA.....1751, 1804
GRAY, SARAH.....431, 1410
GRAYSON, ANDREA.....1108
GREAR MANN, MELISSA.....766, 1177
GREINER, KAREN.....834, 1313, 1314
GRIFFITHS, KENNETH.....304, 305
GRISSOM, MURRAY.....892, 1490
GROGAN, BRIAN.....399, 400, 1314
GROSS, RENEE.....544
GROSSMONT HOSPITAL.....1644
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC.....59
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC, ...525
GROVE, JAY.....711, 1043, 1641
GRUNVALD, EDUARDO.....1249
GUADARRAMA, IGNACIO....1600, 1601
GUALTIERI, CHRISTOPHER.....1326
GUAN, HOWARD.....1864
GUIDI, CASEY.....718, 1628, 1634
GUIDO-ESTRADA, NATALIE.944, 1293, 1306
GULLY, MICHELLE.....969
GUNDOGDU, MELEK.....1293
GUNTA, SUJANA.....266
GUNTHER, HOPE.....766, 1178
GUPTA, ANUJ.....1624
GUPTA, MONIKA.....582, 635, 1581
GUPTA, TRIPTI.....742, 1073, 1270
GUPTA, VARSHA.....432
GUPTA, VINEET.....1250
GURAM, KRIPA.....885
GUTH, CARA.....592, 1425
GUTIERREZ, BLANCA.....432
GUTIERREZ, TANIA.....305

H

HA, THU.....1109, 1110
HACINAS, REYNALDO.....1601
HAI, FAIZI.....1230
HALEY, JESSICA.....671, 699, 1365
HALEY, STEVEN.....1181, 1182
HALGEDAHL, YI TING.1001, 1002, 1003, 1628, 1629
HALTER, KENNETH.....1425
HAMBERRY, CLARISSA.....544
HAMDAN, AYAD.....798
HAMID, WAHIDA.....620
HAMILTON, LISA MARIE.....176, 306
HAMILTON, ROSS.558, 692, 828, 1040
HAMMOND, CHARLES.....803, 1244
HAMPTON, DESTINY.....545
HAN, ANGELA.....1571
HAN, FREDERICK.....938, 1067, 1068
HAN, KYOUNG.....1042
HAN, PAUL.....367, 368
HAN, SULKI.....1756, 1804
HANLEY, LAUREN.112, 159, 210, 400, 401, 402, 529
HANNAWI, ANDREW.....1294
HANNSUN, GEMMY.....892, 1490, 1491
HANONO, ABRAHAM.....1784
HANONO, HELFON.....1784
HANSCH, ERNST.....892, 1491
HANSEN, LAWRENCE.....860, 1355
HAPPY BABY JOURNEY, ...545
HARKNESS, RUMIKO.....753, 1111
HARMEYER, DANIEL.....763, 1170
HAROUSH, GAL.....1111, 1112
HARPEL, SHERYL.....621
HARRINGTON, BARBARA LORRAINE.....1112, 1113
HARRIS, JEFFREY.....851, 852, 1344
HARRIS, PAMELA.....1003, 1004, 1005
HART, BECKY.....1113
HARTFORD, NICOLE.....537, 538
HARTMANN, PHILLIPP.....1392
HARVEY, SCOTT.....834, 1314, 1315
HARVEY-SCHMIDT, JOSEPH.871, 1426
HASEGAWA, CHRIS.....871, 1426
HASHEM, SHIVA.....571
HASSANEIN, TAREK.....1242
HASSANI, FARZANEH.....262, 263
HASTANAN, CAROL.....138
HASTIE, ELIZABETH.....1250
HATEFI, DUSTIN.....711, 917, 1035, 1544
HAYDEN HOME.....1656
HAZELBAKER, PAUL.....368
HEAD, KRISTIN.657, 682, 938, 1005, 1114
HEADLEY, ALISON.....1294
HEALTHY CONNECT SAN DIEGO.....1882, 1883
HEFNER, ANNA.....1114, 1115
HELSTEN, TERESA.....798
HENDERSON, PHILIP.....368, 369
HENDERSON, TREVOR.....433
HENDRIE, KYLE.....1678
HENDRIX, JEFFERSON.....307
HENLEY, MEARA.....452, 453
HENNEIN, LAUREN.667, 693, 945, 1023, 1326
HENNEMEYER, CHARLES.....893
HEPOKOSKI, MARK.....814, 1262
HERMAN, ANDREA.....515
HERMANSON, KATHLEEN.....559
HERNANDEZ, GABRIELA.....1426
HERNANDEZ, MIRIAM.1585, 1586, 1587
HERNANDEZ, RALPH.....307
HERSHFIELD, SOLOMIYA.772, 1198, 1199
HERSKOVITZ, SCOTT.....1374
HEYMAN, BENJAMIN.....799
HIBBS, NICOLE.....433
HIETALATI, SAMANTHA.....823, 1281
HIGGINSON, MICHELLE.....369
HIGUERA, EDITH.....1427
HILL, GENIELYN.....1115
HILL, LINDA.....1458, 1459

M. Lista de médicos de atención primaria

HILLDALE HABILITATION CENTER. 1653
HILLIARD, THESALONICA. 277, 1115
HINCHCLIFF, KATHARINE. ...925, 1556
HIRSCH, JENNIFER. 766, 767, 1178
HIRSHMAN, BRIAN. 712, 917, 1544
HIXSON, THOMAS. 1804
HO, AMIEE. 1787, 1843
HO, GORDON. 741, 1068
HO, HOANG. 1843
HO, LYSA. 276
HO, TRAM. 1741
HOANG, CHI. 1116, 1117
HOANG, KEVIN. 1844
HODGKIN, EDWARD. 138
HOERRES, LYNN. 929, 1117
HOFFMAN, STEVEN. 1844
HOGAN, NICHOLAS. 1473
HOGAN, ROSELYNN JOY.1117, 1118, 1119
HOGARTH, MICHAEL. 805, 1250
HOGUE, BRENNA. 773, 1199
HOLLANDSWORTH, HANNAH.914, 1539, 1540
HOLLICK, NATALIE. 123
HOLMBERG, CARRIE. 1679
HOLTZ, HANNAH. 1679
HOM, DAVID. 852, 853, 1345, 1346
HOM, GREGORY. 1844
HONASOGE, AKILESH. 579, 690, 931
HONG, DANA. 1222
HONOLD, JOSE. 1281, 1282
HOO, PAMELA. 844, 1787, 1844
HOPPER, AUSTIN. 885
HORIZON CBAS. 1659
HORIZON RECUPERATIVE CARE.1871, 1885
HORNBEAK, KIRSTEN. 651, 773, 1199
HORTON, LUCY. 1245
HOSALKAR, HETAL. 734
HOSEIN, NADEEN. 1215, 1216
HOULE, STEPHANIE. 1624
HOURIHAN, KEITH.628, 629, 935, 978, 1182
HOUSELY, ALEXIS. 907
HOWARD, LANDON. 763, 1170
HOWE, STEVEN.915, 925, 964, 966, 1623
HOWELL, AMANDA. 1005, 1006
HOXMEIER, KRYSTA. 1427, 1428
HOYT, BRIGGS. 841, 1327
HRYNIEWICKI, ADAM. 1199
HSU, CHRISTOPHER. ..1756, 1773, 1805
HSUEH, JESSICA. 841, 842, 1327
HU, JINGJING. 864
HUANG, CRYSTAL. 308
HUANG, GRACE.1735, 1756, 1773, 1788, 1805, 1825, 1845
HUANG, MARIA. 1410
HUANG, PETER. 1743
HUBLEY, PAUL. 85
HUDSON, HENRY.932, 933, 1765, 1773, 1788, 1806, 1825, 1845
HUERTA, STEVEN. 240, 241, 242
HUME, QUINN. 1055
HUPFELD, CHRISTOPHER. 659
HURST, MICHAEL. 108, 109, 499
HURT, BRIAN. 893, 1491, 1492
HURVITZ, ANDREW. 923, 1550
HUSSEMAN, JACOB. 853, 1346
HUSTANA, LARA. 1788, 1789, 1845
HUTCHISON, HEIDI. 651
HUYNH, CHI. 1846
HUYNH, PAUL. 1327, 1328, 1846
HYLTON, DIANA.650, 734, 938, 1055, 1641

I

IBANEZ, BERENICE. 1618, 1728
IBANEZ, SIR CEDRIC. 71
IBARRA, ALLISON. 806, 1250
IBARRA, MARTHA.566, 1119, 1120, 1601, 1602
IBRAHIM, ISLAM. 814, 1262
IGNACIO, ROMEO. 1540
IKE, ERICA. 522, 1620
ILICETO, ALESSANDRO. 828, 1294
IMPERIAL BEACH HEALTH CENTER. 38, 1877, 1885
IMPERIAL BEACH HEALTH CENTER, ...198
INDA, PRISCILLA. 592, 593, 641
INGULLI, ELIZABETH. 1401
INOCELDA, ANDREW. 559
INTEGRATED HEALTH PARTNERS. .1873, 1875, 1876, 1877, 1884, 1892, 1896
INTERFAITH COMMUNITY SERVICES. 1876
IORIO, ALANNA. 657, 753, 1571
IRAGUIMADOZ, VICENTE. 828, 1295
ISAIAS, AGNELA. 123, 124
ISHIMINE, PAUL. 1374
ISLAM, JULIE. 630, 631, 1216
IVANOV, MARGARET. 806
IYENGAR, RADHA. 73

J

JABBOUR, MOUSSA. 806, 1251
JABRI, ZAIN. 148, 149, 370
JACKSON, DANA. 166, 213
JACKSON, GAVIN. 370, 371
JACKSON, MADELEINE. 1550
JACKSON, MARILYN.621, 682, 683, 684, 935, 1037, 1572
JACOBS, KARL. 1663, 1664
JACOBS-KLEISLI, MILAGROS. 124
JACOBSEN, GARTH.679, 914, 1540, 1541
JACQUES, KAYLA. 828, 1295
JAFFRAY, JULIE. 1396
JAFFRAY, PAUL. 894, 1492, 1493
JAHANGIR, SAIRAH. 1700
JAIN, ALEXANDRA. 605
JAIN, NIKHIL. 1073, 1074, 1566, 1624
JAINCHILL, AMANDA. 308
JAMES, CHRISTINE. 1048
JAMISON, KAREN. 371
JANNESARI, ROYA. 684
JARDON, JAVIER. 636
JAZAYERI, AMIR. 958, 1393
JEFFERIES, KATHLEEN. 1322
JENKINS, ENCHANTA. 509
JENNINGS, AMY. 1728
JENSEN, BRIAN. 1034, 1688
JEWISH FAMILY SERVICE OF SAN DIEGO. 1891, 1892
JI, AMANDA. 532

M. Índice de proveedores de atención primaria

JIANG, WEN. 697, 948, 1347
JIMENEZ BACARDI, ADRIA. 1410
JIMENEZ, ANDREA. 605, 606, 726, 988
JIMENEZ, KRYSTAL. 86
JIMENEZ, NANCY. 1728
JOHN, MIRA. 815, 1263
JOHNSON, DANIEL. 86, 87, 197
JOHNSON, KENNADY. 1521
JOHNSON, SHAWNA. 1120, 1121
JOLICOEUR, MEGAN. 789, 1222, 1223
JOMOC, CAITLIN. 845, 1336, 1789, 1846, 1847
JONES, CHRISTA. 753, 1121
JONES, SETAREH. 167
JORDAN, JAMIE. 433
JOSHI, YASH. 1701
JOSHUA, JISHA. 884, 1473, 1474
JOYCE, ROBERT. 1868
JU, NATHANIEL. 1634, 1635
JUACHE, GABRIELA. 1587
JUANG, PATRICIA. 787, 1216
JUAREZ, AMERICA. 1666
JUAREZ, LETICIA. 645, 1452
JUAREZ, PATRICIA. 434
JUSTINO, HENRI. 1365

K

KADER, ANDREW. 928, 1562
KAFRI, HASSAN. 633
KAHL, NICHOLAS. 549, 684
KAKISH, DAVID. 894, 1493
KALBAKJI, NATALY. 1735, 1765, 1774, 1789, 1806, 1826, 1847
KALRA, ANKUR. 1743, 1826, 1866
KAMDAR, BIREN. 815, 1263
KAMOTO, LYNN. 594, 1614
KANE, CHRISTOPHER. 928
KANNAN, SWATI. 1189
KANSAL, LEENA. 829, 1296
KANTAS, PARIS. 1602
KARANDE, PRACHI. 606, 607, 726, 988
KARAPETIAN, ELENA. 1774
KARCHES, KELLI. 372
KARI, ELINA. . 853, 854, 948, 1347, 1348
KARMAKAR, KANKA. 434
KASEY'S HOME. 1649
KATIBIAN, DAVID. 1393
KATZ, YISRAEL. 806, 1251
KATZMAN, BARRY. 1735, 1757, 1807, 1827, 1847
KATZMAN, LEE. 1752, 1807
KAUFER, DAVID. 499, 500
KAUFHOLD, ANNE. 63, 68, 486, 487
KAUFMAN, JENNIFER. 309
KAUNITZ, GENEVIEVE. 1190
KAUR, JATINDER. 176, 177, 272
KAWASAKI, MEGAN. 735, 1055, 1056
KAZEM, AHMAD. 1182, 1183
KAZEM, HARON. 572
KEARNS, MARK. 926
KEDDINGTON, JOAN. 1744, 1827, 1866
KEEN, WILLIAM. 743, 1074
KEFLEZIGHI, BAHGHI. 309, 310
KEHOE, KATRINA. 1171
KELCHNER, MATTHEW. 551, 1620
KELLEHER, BRIDGET. 718, 719, 720, 1007, 1008, 1629, 1630
KELLER, BENJAMIN. 1553
KELLOGG, KRISTEN. 622
KELLY, KATHERINE. 1016
KELLY, KIM. 1744
KELNER, MICHAEL. 867, 1360
KEMP, KATHRINE. 1121
KESANAPALLI, DEEPTHI. 435
KETCHEL, CLINT. 246, 247, 248, 535
KEUM, SARAH. 566
KHAFAJA, MOHAMAD. 1679, 1701
KHALIGHI, PAYMAN. 1848
KHALIL, VADY. 1736, 1757, 1766, 1774, 1790, 1807, 1808, 1827, 1848
KHAMISA, SORAIYA. 1701
KHAMISHON, BORIS. 1296
KHAN, ALIYA. 159, 160
KHAN, FAHAD. 1848
KHAN, MATTHEW. 1122
KHAN, SHAHFAR. 1375
KHANNA, ARJUN. 917
KHANNA, POORNIMA. 372
KHARE, MANASWITHA. 1411
KHATIB, NORA. 1328
KHIEU, TINA. 1828
KHINDA, SUNEHA. 1783, 1848
KHURANA, AMAN. 894, 1494
KI, TRISH. 1122
KIDANE, ZINNIA. 1123
KIDDER, BRENDAN. 310, 1223
KIERNAN, ROBERT. 1428, 1429
KIKUNAGA, HENRY. 1739, 1744, 1745, 1808, 1821
KIM MCMANUS, OLIVIA. 664, 692, 944, 1297
KIM, ELIZABETH. 735, 1056
KIM, GRACE. 1190
KIM, JENNY. 1745
KIM, JOHN. 1321
KIM, MICHAEL. 1024, 1025, 1638, 1639
KIM, MICHELLE. 1041
KIM, PHILIP. 845, 1336, 1774, 1790, 1849
KIM, SHANNON. 1065
KIM, YUHEE. 206
KIM, YUNMI. 970, 1123
KINDRED HOSPITAL SAN DIEGO. 1644
KING CHAVEZ HEALTH CENTER. 49
KING CHAVEZ HEALTH CENTER, . 345
KING, MARY. 1745, 1828, 1867
KINGDON, JOANNA. 952, 1028, 1031, 1375
KIRKLAND, STEPHANIE. 190, 191, 192, 720, 723, 1630
KLAREN, AMANDA. 1775, 1849
KLIGIS, GABRIELLE. 1702
KLINE, LANNING. 1328
KLING, KAREN. 679, 713, 964, 1036, 1553, 1554
KLUEMPER, NICOLE. 1465, 1702
KNOX, LATANIA. 545
KOBAYASHI, KAREN. 510, 1610
KOCOL, DUSTIN. 403
KODSI, ALICIA. 168
KOHATSU, KAREN. 1315
KOHLI, KANCHAN. 1679, 1703
KOHOUT, KATHRYN. 1572
KOLAR, MATTHEW. 1190

M. Lista de médicos de atención primaria

KOLB, FREDERIC.....1556, 1557, 1558
KONDILI, DHIMITER. 895, 1494
KOO, ANITA.552, 556, 586, 587, 638, 696, 983, 984
KORMANIK, PATRICIA. ... 658, 754, 1631
KORSAND, SID. 124, 125, 236
KOSEL, MATTHEW. 1587, 1588
KOTHA, PURUSHOTHAM. 928
KOUSARI, JHALEH. 1572, 1573, 1574
KRAK, MICHAEL. 538, 1375
KRAMER, MELISSA. 266
KRAPES, MICHAEL. 1034, 1688
KRAUSE, AMANDA. 793, 1230
KRAUSE, MARTIN.650, 740, 938, 1063, 1642
KRESHAK, ALLYSON. 773
KRIJGER, LISA. 373
KRIKSCIUN, JESSICA. 1729
KROL, CAITLIN. 735, 1056
KRUCKENBERG, KATHERINE.1703, 1704
KRUMMEN, DAVID. 1270
KUIOKA, TROY. 648
KULASA, KRISTEN. 788, 1217
KULISCHAK, JOHN. 1790, 1791, 1849
KUMAR, AVNEE. 963, 1643
KUMAR, SOMA. 1231
KUO, DENNIS. 1396
KUO, SELENA. 793, 1231
KUPELIAN, CHLOE. 930, 1244
KUROSAKA, MOMO. 1223, 1224
KURUKULASURIYA, DAYANTHITHI. 248, 249
KUTZ, CRAIG. 774, 1200
KVIATKOVSKY, MILLA. 807, 1251
KWON, MICHAEL. 1551

L

LA COSTA HOUSE. 1649
LA MAESTRA CHC EL CAJON BROADWAY. 32
LA MAESTRA CHC EL CAJON BROADWAY, ... 144
LA MAESTRA CHC-REA AVE. 32
LA MAESTRA CHC-REA AVE, ... 144
LA MAESTRA COMMUNITY HEALTH CENTERS. 1873, 1878, 1880, 1886, 1887, 1888, 1889, 1890, 1891
LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT. 50
LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT, .345, 346
LA MAESTRA FAMILY CLINIC INC.32, 40, 41, 51
LA MAESTRA FAMILY CLINIC INC, ... 145, 227, 346
LACH, REBECCA. 310, 311, 312
LACHARITE-ROBERGE, ANNE-SOPHIE. 818, 1270, 1271
LAD, NIKISHA. 1686
LAFORTEZA, JOZELLE. 1123
LAFREE, ANDREW. 774, 1200
LAGO HERNANDEZ, CARLOS.807, 808, 1252
LAIDLAW, JOHN. 1704
LAINE, LESLIE. 1124, 1125
LALITHAKUMARI, ARYA. 373, 374
LAM, ANNE. 1791, 1849
LAM, KHANH. 563, 1083
LAM, MICHAEL. 808, 1252
LAMALE-SMITH, LEAH.666, 692, 835, 1315, 1316
LAMANTIA, MICHELE. 374, 500
LAMBERT, GAGE. 1429
LANDEO GUTIERREZ, JEREMY. ..1403
LANDIS, SARAH. 675, 676
LANE, BRIAN. 1282
LANE, KIMBERLY.567, 615, 658, 754, 930, 1125, 1126
LANG, LESLIE. 1008
LANIOUS, OKSANA. 1466, 1704
LANTRIP, KEATON. 763, 1171
LANUZA, MARK J. 218
LAPINA, LORI. 1429, 1430
LARA, LESLEY. 87
LARSEN, JULIE. 1322
LASALLE, ELIZABETH.671, 699, 950, 1026, 1366
LASOFF, DANIEL. ... 774, 775, 1200, 1201
LASSWELL, EVE. 881, 1680
LAU, KUEN CHINE. 1850
LAURENT, LOUISE. 662, 822, 1278
LAVEMAN, EVAN. 775
LAVERTY, CHAMINDRA. 1297
LAW, KAREN. 219
LAWRIE, ALISA. 435
LAZAR, DAVID. 1554
LE ROUX, MICHELLE. 803
LE, CRYSTAL. 690, 1282
LE, DIANA. 645, 1453, 1454
LE, HUAN. 1474
LE, NGUYEN. 435
LE, TAM. 1775
LE, TAYLOR. 641
LEDBETTER, ALEX. 1680, 1704
LEE, AUSTIN. 1828
LEE, BEGEM. 1411
LEE, DAVID.829, 1297, 1298, 1680, 1704
LEE, JASON. 1766, 1775, 1850
LEE, JENNIFER. 871, 1431
LEE, JIHYUNG. 747, 1083
LEE, KAREN. 1238
LEE, PATRICIA. 74
LEE, RYANT. 1522
LEE, SALLY. 1808
LEE, SANDRINE. 312, 313
LEGACY CARE ADHC CBAS. 1660
LEHNERT SCHUCHARDT, ELEANOR. 1366
LEIBEL, SYDNEY. 1362, 1363
LEMON GROVE FAMILY HEALTH CENTER. 39
LEMON GROVE FAMILY HEALTH CENTER, ... 206, 207
LENHART-PENDERGRASS, PATRICIA. 674, 959, 1031, 1403
LENNON, RYAN. 1126
LEONARD, BEVERLY.567, 622, 623, 1620, 1621
LEONARD, LISA. 1638
LEPEZ, DAVID. 487
LERIAS, NICHOLAS. 237
LEUIN, SHELBY. ... 670, 697, 1026, 1348
LEUTE, ERIC. 219

M. Índice de proveedores de atención primaria

LEVERONE, NICHOLAS.655, 884, 963, 1252, 1643
LEVINE, MATTHEW.....1217
LEVY, AVIYA. 704, 1406
LEVY, MICHAEL.....1544
LEVY, PHILLIP.....1808
LEWIS, MICHAEL.....1561
LEWIS, PRIYA.....1558
LI, ALEXANDRIA.....1329
LI, HOJUN. 1397
LI, JINGHONG.776, 815, 941, 1475, 1642
LI, KINCHEON.....1396
LI, XIA. 1680, 1705
LIBERTANA HOME HEALTH OF SHERMAN OAKS. 1896
LIEBER, CAROL.....554
LIEPERT, AMY. 1535
LIGHTBRIDGE HOSPICE LLC. 1894
LIM, GARRETT. 895, 1495
LIM, IMELDA. 970, 971, 1126, 1127
LIN, CHRISTINE.....816, 1263, 1264
LIN, HENRY. 1850
LIN, JOYCE. 872
LIN, TOM. 1393
LINARES, YENDI.....538
LINDA VISTA HEALTH CARE CTR. 51
LINDA VISTA HEALTH CARE CTR, ...346, 347
LINDBACK, SARAH. 273
LINDEMAN, KURTIS. 313
LINDEMANN, CHRISTINA. 1431
LINDSEY, SABRINA. 685
LIOTTA, BENJAMIN.776, 777, 1201, 1202
LIOU, ANGELA. 1397
LIOU, YUJIE.....1190
LIPARI, RACHEL. 838
LIPPI, MATTHEW. 777, 1202
LIPSCHITZ, LISA.113, 160, 210, 211, 403, 404, 405, 406, 407, 529, 530
LIU, ANDREW.....1021
LIU, SHANGLEI. 911, 1532, 1533
LIU, TIMOTHY.....1705
LIU, YUNXIANG.....1329
LLANES, BENJAMIN. 1851
LLOYD, MATTHEW.....1431, 1432
LOEFFLER, ALLISON.465, 466, 467, 1022, 1582
LOGAN HEIGHTS FAMILY HEALTH CENTER. 54, 55
LOGAN HEIGHTS FAMILY HEALTH CENTER, ...347, 348
LONGARDNER, KATHERINE.1298, 1706
LOPER, KAREN.....436
LOPEZ, JOANNA.....1671
LOPEZ, MARIBEL. 1729
LOPEZ, MARIO. ...1432, 1433, 1621, 1622
LOPEZ, NICOLE. 911, 1533
LOPEZ, SAMANTHA.....1706
LOPEZ, XIMENA. 960, 1411
LORENZO, PATRICIA. 1218
LOSTETTER, ADRIENNE. 274
LOUGH, MICHELLE.....314
LOVERN, JENNIFER. 1183
LOVING CARE ADHC. 1661
LOZIER, JEFFREY.....1041
LU, JULIE. 314
LU, TAMMY. 130, 131, 277, 278
LUCAS, MARIA. 1323
LUHAR, RIYA.....1299
LUI, ASONA..... 885, 886
LUJAN, ARLEEN.....436
LUKACZ, EMILY.....790, 1227
LUM HO, RACHEL.....1583
LUM, YUIN-WAH..... 971
LUNA, ABIGAIL. 724, 1127
LUNDEBERG, HOLLY.....1706
LUONG, TRAN. 872
LUSCHWITZ, BRIAN.....539
LUU, DANIEL. 1183
LUU, JACKIE.....873
LWIN, THUTHIRI. 1618
LY, BINH. 777, 1202
LY, COURTNIE. 676

M

MA, GARY..... 819, 1272
MA, JANET. 819, 1271, 1272
MAALOUF, LAUREN.....607
MAC, VICTOR..... 267
MACIAS, ALISSA. 453, 454
MACINTYRE, ELIZABETH..... 267
MACKAY, GILLIAN. 666, 835, 1316
MADANY, GEORGE.....436
MAGEE, ANNA. 1673
MAGNOLIA ADULT DAY HEALTH CARE.....1659
MAHENDRAN, SRIVIDYA..... 437
MAHMUD, EHTISHAM. 1272
MAHTA, ALI. 829, 1299
MAJITHIA, AMIT..... 808, 1253
MALAK, LAWRENCE. 1666, 1707
MALHOTRA, ARATI..... 470, 471, 472
MALINAK, JAMES.....149
MALONEY, IAN.....735, 1057
MALONEY, NOLAN.....1191
MAMAS KITCHEN.....1894
MANCHEL, BRUCE.599, 1455, 1617, 1618
MANDEVILLE, ROSS. 582, 635, 1582
MANDOYAN, AUSTIN. 139, 315
MANDT, TYLER.... 895, 896, 1495, 1496
MANGENE, CYNTHIA. 131
MANGINE, REGINA..... 522
MANI, NASRIN. 637
MANINI, RAQUEL. 545
MANNEN, JOSEPH. 1752, 1809
MANNINO AVILA, ELIZABETH. 1412
MANNINO, ELIZABETH. 203
MANRIQUEZ-CASTILLO, ERENDIRA. 437, 438
MANSOUR, SABAH. 487, 488
MANSY, TAMARA. 150
MAREK, MAKSYM..... 583, 635, 1582
MARINO, NIKOLAS..... 808, 1253
MARISCAL, MIGUEL. 594
MARKS, ROBERT. 896, 1496
MARLAY, GREG. 1829
MAROLLA, ALICE. 907
MARQUARDT, DIANA. 375
MARR, RYAN..... 1809, 1851
MARSHALL HOUSE.....1656
MARSHALL, LAWRENCE. 917, 1544
MARSTON, JACQUELINE. 315, 316, 317
MARTIN, FREDERIC..... 1299, 1300

M. Lista de médicos de atención primaria

MARTIN, HALEY. 873, 1433
MARTIN, RIA. 1127
MARTIN, THOMAS. 1245, 1246
MARTINEZ, BRIANNA. 1224
MARTINEZ, CAROLYN. 278
MARTINEZ, STEPHANIE.1667, 1681, 1707, 1708
MARTINEZ-ANDREE, INGRID. 438
MARTINEZ-MURGUIA, IRENE.986, 1433
MARYOUNG, ALLISON.1736, 1757, 1776, 1791, 1809, 1829, 1851
MASCARENO, EFRAIN. 1745
MASON, KASSANDRA. 1663, 1665
MASON, MATTHEW. 1203
MASON, TAMI. 1663, 1665
MASSENBURG, BENJAMIN.1558, 1559
MATHEW, SONIA. 500, 501
MATIAS, JULIE. 455, 456
MATICH, BRANKO. 317, 318
MATOBA, NANA.... 581, 824, 1283, 1284
MATSUOKA, AKIHIRO..855, 1348, 1349
MATTSON, LACI. 545
MAURIZ, GRAZIANO. 1674
MAXWELL, BENJAMIN. 1681
MAXWELL-JUNGE, MELISSA. 1669
MAY, LOUIS. 150, 501, 632
MAYHUGH, ALYSCIA. 1672
MC ELROY, CARTER. 1522
MCALISTER INSTITUTE. 1894
MCAULEY, ROBERT. 1674
MCCALLUM, JAMES. 1218, 1219
MCCAMMACK, BRADLEY.267, 268, 269
MCCANDLESS, RACHEL. 950, 1366
MCCARTHY, SARAH. 1631
MCCLEAN, ESMERALDA.845, 1792, 1851, 1852
MCCULLEY, DAVID. 1284
MCCULLOUGH, LYAN LOVE. 972
MCCULLUM, TIFFANY. 1466, 1708
MCDANIEL, LISA. 249, 250
MCDANIEL, MICHELE. 867, 1376
MCEVOY, ANNE. 1376
MCFARLAND, NATHAN. 204, 375
MCGHEE, JULEA. 1672
MCGRAW, JOSEPH.1736, 1766, 1776, 1810, 1829, 1830, 1852
MCHENRY, KATHRYN. 177
MCKENNETT, MARIANNE. 87, 88
MCKINNEY, SARA.666, 835, 836, 1317, 1318
MCKNIGHT, TRISTAN. 1357
MCMURREN, BRITTANY. 1758
MCNEALY HOUSE. 1654
MD TODAY URGENT CARE. 1899
MEADOWS, AUDRA. 836, 1318
MEASER, JACQUELINE. 736, 1057
MEDAK, ANTHONY. 778, 1203
MEDINA, ALEXANDER. 220, 978
MEDINA, RUBELETA. 1128
MEDZED PHYSICIAN SERVICES INC. 1872
MEIER, EMILY. 1466, 1708
MELENDEZ, ARIANA. 836, 1319
MELENDEZ, DAVIS. 1726
MELGAR, MONICA. 319
MENDENHALL, ANNA. 172
MENDES, CHANTAL. 588, 701, 1377
MENDEZ, ANDRES. 881, 1681
MENDEZ, DIEGO. 113, 114, 161, 510, 511
MENDEZ, JESUS. 594
MENDOZA, GRETEL MARIE. 1128
MENDOZA, RAYMUNDO. 1830
MENON, POOJA. 88
MERALI, MURTAZA. 1810
MERCADO FORSECK, ALEJANDRA. 546
MERCER, KELLY. 641, 642, 986, 1434
MERGENTHALER, SIGRID. 1727
MERRILL, COREY. 874, 1434
MERRILL, SARAH. 89
MERTE, BRYAN. 1203
MESIWALA, ADNAN. 952, 1377
METCALF, ASHLEY. 1377
MEYER, MEGAN. 736, 1058
MICHAEL, RAMI. 151, 632
MICHALOWSKI HOME. 1649
MICK, SHARON. 754, 755, 1128, 1129
MID-CITY COMMUNITY CLINIC.49, 50
MID-CITY COMMUNITY CLINIC, .348, 349
MIDORO, ABEGAILLE. 973, 1129
MIGNEA, DAVID. 607, 608, 648, 1523
MILDER, EDMUND. 1399
MILES, RENEE. 1674
MILLAR, MELISSA. 1058
MILLER, DIANA. 251, 1018
MILLER, DONALD. 269
MILLER, EVA. 1129
MILLER, LAUREL. 1434, 1435
MILLER, WILLIAM. 1530
MILLIRON, ANTHONY. 722
MILLS, BRAD. 1709
MILLS, DAVID. 953, 1378
MILLS, TATYANA. 1412
MINNICH, AUDRIE. 89
MINOKADEH, ANUSHIRVAN. 650
MIRACLE, ANGELYN. 939, 1623
MIRON, JEAN-PHILIPPE. 1709
MISTRY, CHETAN. 125
MITCHELL, JOSEPH.923, 924, 1551, 1552
MITCHELL, NORA. 1681
MIYAGI, NICOLE. 1710
MIZOGUCHI, LIANNE. 1792, 1852
MIZZELL, ANNA. 743, 1074, 1075
MOELLENHOFF, MICHAEL..736, 1058
MOHAMEDALI, BURHAN.579, 633, 690, 1272, 1273, 1581
MOHAMEDI, NADIA. 220
MOHEBBI, ATHENA. 755, 1130
MOJICA, MARIO. 1046, 1579, 1580
MOLINOS, NICOLE. 202
MOLL, ANGELA.668, 694, 946, 1023, 1329, 1766, 1776, 1852
MONAHAN, CAROLYN. 472
MONARCH HOME. 1654
MONGA, MANOJ. 1563
MONTANE, RUBEN. 1184
MONTEZ, REBECCA. 1689
MONTGOMERY HOUSE. 1656
MONTOYA, JESSICA. 1466, 1710

M. Índice de proveedores de atención primaria

MOODLEY, AMARAN.....1246
MOONEY, PATRICIA.....1574
MOOR, TRACY.....1793, 1853
MOORE, SHAVON.....1682, 1710
MORALES, ALEJANDRA.....319
MOREIRA, LUCILA.....274
MORENO, MARIO.....896, 1497
MOREO, HUNTER.....1435
MORGAN, HUNTER.....1811
MORRIS, CHAD.....649
MORRIS, SHEILA.....584
MORRISON REYES, JOSHUA.1737, 1767, 1776, 1793, 1811, 1830, 1831, 1853
MORTIMER, DORI.....274
MOSHTAGHI, OMID.....933
MOSTOFIAN, EIMANEH.....467, 468
MOUNTAIN SHADOWS COMMUNITY HOMES - APPLE.....1649
MOUNTAIN SHADOWS COMMUNITY HOMES - ASH.....1650
MOUNTAIN SHADOWS COMMUNITY HOMES - BIRCH.....1650
MOUNTAIN SHADOWS COMMUNITY HOMES - CEDAR.....1650
MOUNTAIN SHADOWS COMMUNITY HOMES - CREPE MYRTLE.....1650
MOUNTAIN SHADOWS COMMUNITY HOMES - ELM.....1655
MOUNTAIN SHADOWS COMMUNITY HOMES - FIG.....1655
MOUNTAIN SHADOWS COMMUNITY HOMES - JACARANDA.....1650
MOUNTAIN SHADOWS COMMUNITY HOMES - LEMON.....1651
MOUNTAIN SHADOWS COMMUNITY HOMES - MAPLE.....1651
MOUNTAIN SHADOWS COMMUNITY HOMES - OAK.....1655
MOUNTAIN SHADOWS COMMUNITY HOMES - OLIVE.....1651
MOUNTAIN SHADOWS COMMUNITY HOMES - ORANGE.....1651
MOUNTAIN SHADOWS COMMUNITY HOMES - PALM.....1652
MOUNTAIN SHADOWS COMMUNITY HOMES - PINE.....1652
MOUNTAIN SHADOWS COMMUNITY HOMES - PLUM.....1652
MOUNTAIN SHADOWS COMMUNITY HOMES - SPRUCE.....1652
MOUNTAIN SHADOWS COMMUNITY HOMES - TANGELO.....1652
MOUNTAIN SHADOWS COMMUNITY HOMES - WILLOW.....1653
MOUSSAVIAN, MEHRAN.634, 1020, 1273, 1274, 1609
MOVAGHAR, MANSOOR.668, 695, 842, 946, 1024, 1330, 1777
MOYA, MARY.....90, 488
MUHAMMAD, LAMA.....1710, 1711
MUNCADA, CAESAR.....838
MUNDAE, RUSDEEP.584, 637, 695, 983
MUNOZ, EMMANUEL.1574, 1575, 1576
MUNRO, KRISTA.....755
MURADIAN-MOORE, SARAH.....639
MURPHY, CARMEL.....172
MURRAY, MATTHEW.....1378
MURTHY, NIKHIL.....561, 918, 1035
MUSINSKI, SCOTT.....511
MUUS, SUSAN ANGELICA.....756

N

NACOSTE, LAKEISHA.....756
NADI, FAHIMA.....151
NAGHI, JESSE.....580
NAGNUR, PRITI.....168
NAIK, SHILPA.....169
NAJAFI, DAVID.....1330
NAJAND, SADAF.....1038
NAKAMITSU, ABIGAIL.....1436
NAKAMURA, MELANIE.....178
NAKAMURA, TIFFANY.....1275, 1276, 1711
NARANJO, RODRIGO.....376, 377
NARAYAN, ARCHANA.....152
NARAYAN, HARI.671, 672, 700, 951, 1366
NARAYANAN, MEENA.377, 378, 525, 526
NAREZKINA, ANNA.743, 744, 1075, 1076
NASONGKLA, CHATRATHIP.....1608
NASSAR, JEANNE.....1436
NASSIR, BASSAM.....139
NATHAN, CARLY.....767, 1179
NAUDIN, VERONICA.....539
NAVA, PETER.....1008, 1009, 1010
NAVARRETE CELESTINO, MISHEL.....1589, 1590
NAVARRO, VANESSA MARIA.221, 320, 489
NAYER, ZACHARIA.....842, 1330, 1331
NCHOTU, SUCCESS.....706
NEGRON, RICARDO.....708
NEIGHBORHOOD HEALTHCARE.59, 60
NEIGHBORHOOD HEALTHCARE ESCONDIDO.....34
NEIGHBORHOOD HEALTHCARE ESCONDIDO, ...181, 182
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER.....45
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER, ...272, 273
NEIGHBORHOOD HEALTHCARE LAKESIDE.....38, 39
NEIGHBORHOOD HEALTHCARE LAKESIDE, ...203
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL.....34
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL, ...182
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL.....34
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL, ...182
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY.....34
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY, ...183
NEIGHBORHOOD HEALTHCARE, ...532, 533
NEJATI, FRESHTA.....1130

M. Lista de médicos de atención primaria

NESTOR COMMUNITY HEALTH CENTER. 52
NESTOR COMMUNITY HEALTH CENTER, ...349
NEVAREZ, IRENE. 214, 279
NEVES, VANESSA.... 473
NGO, MAI. 960, 1413
NGUYEN, ALEXANDRA. 608
NGUYEN, ANTHONY. 1238
NGUYEN, BRUCE.....1854
NGUYEN, CARIE. 90, 91
NGUYEN, DANIELA. 251, 252, 253
NGUYEN, HARRY. 1523
NGUYEN, HOANG. 1682, 1711, 1712
NGUYEN, JANICE. 438
NGUYEN, JASMINE. 1854
NGUYEN, JULIA.....1683, 1712
NGUYEN, LINH..... 91
NGUYEN, MARGARET. 1378
NGUYEN, MICHELLE. 809, 1253
NGUYEN, MYLINH. 1378
NGUYEN, NGOC.....320
NGUYEN, NINA. 1130
NGUYEN, QUOC-SY. 736, 1059
NGUYEN, THANH. 1854
NGUYEN, THERESA.....1746, 1831, 1867
NGUYEN, THY. 1812
NGUYEN, TIA. 608, 609, 727, 988, 989
NGUYEN, TRACY. 1746
NGUYEN, TRUC. 125
NGUYEN, VANESSA. 623, 1576
NGUYEN, VI.....169
NGUYEN, VIET. 1855
NGUYEN, VUONG. 678, 905, 1515
NGUYEN-CLEARY, THAI. 321
NHAN-CHANG, CHIA-LING.662, 822, 1278, 1279
NIAKAMAL, EVAN. 706
NIAZI, HARRIS. 140, 321, 322
NIBBELINK AHEARN, SANDRA. .. 1010
NICHOLAS, ESTELA. 1631
NIEMI, ANNA-KAISA. 581, 1235, 1284
NIGRO, JOHN. 1561
NIKZAD, JASON. 221, 222, 489
NINER, JEANNE. 973
NISHIKAWA, MOENA. 539
NISSAN, BETI. 515, 516
NOCEDA, ANA. 1131, 1132
NOKES, BRANDON..... 809, 1254
NOLASCO, JOANNA. 222
NOORI, SARA..... 1783
NORD, GABRIELLE. 1032, 1033
NORMAN, MARC..... 1467, 1712
NORRIS, JEFFREY. 322
NORTH PARK FAMILY HEALTH CENTERS. 48
NORTH PARK FAMILY HEALTH CENTERS, ... 350, 351
NORTON, CALEB. 1132, 1133
NORTON, LISA.... 322, 323
NOSTE, ERIN. 778, 1203, 1204
NOUREDDIN, NABIL.....794, 1231, 1232
NOVENCIDO, ANDREW.609, 610, 727, 989
NOVENO, HILARIO JR. 973, 974
NOVIKOV, YEVGENY. 809, 1254
NOVOTA, GABRIELA. 269
NUNO, JOSE.....1436
NUQUI, JOSIE. 323
NURTURING CARE LLC. 1881
NUTAITIS, ALEXANDRA..... 837, 1319
NYMAN, KATHERINE.581, 663, 824, 943, 1285

O

O HALLORAN, HENRY.1767, 1777, 1855
OCAMPO, ELAINE. 279
OCEGUEDA, JOSHUA..... 222, 223
OCHOA, ERLINDA. 623, 624, 974
OCHOA, RAUL.....1604
OCONNELL, STEFANY.....724, 1133
ODA, THAGHAR. 131, 132, 280, 281, 282
ODISH, MAZEN.....816, 1264, 1265
ODONNELL, F.....1286
ODONNELL, NICOLE. 685
OGUNLEYE, FOLUSO.....1238
OHALLORAN, HENRY.669, 695, 946, 1024, 1331
OIRA, VICTORIA.....126
OKADA, MICHELLE. 874
OKAMOTO, VINCENT. 737
OLIVER, DEANNA. 1232
OLSEN, MARTIN. 1184
OMAE, ILANA. 546
OMIWADE, OLUWAPOSI. 501, 502
OPARA, CHINYERE. 725, 1133
OPEN ARMS ADHC. 1658
OPEN ARMS ADULT DAY HEALTHCARE.....1658
OPERATION SAMAHAN - MIRA MESA. 53, 56
OPERATION SAMAHAN - MIRA MESA, ...351, 352
OPERATION SAMAHAN - NATIONAL CITY. 40
OPERATION SAMAHAN - NATIONAL CITY, ...227
OPERATION SAMAHAN GRANGER SCHOOL BASED. 41
OPERATION SAMAHAN GRANGER SCHOOL BASED, ...228
OPERATION SAMAHAN RANCHO PENASQUITOS. 46, 53, 57
OPERATION SAMAHAN RANCHO PENASQUITOS, ... 289, 352
ORFF, HENRY.....1467, 1713
ORIENTE HOUSE. 1657
OROZCO, KATHILEEN.91, 92, 323, 324
ORPILLA, IMELDA. 1133, 1134
ORR, JEREMY..... 1265
ORTEGA, LUIS. 490, 1606
ORTIZ, BEVERLY.....1689
ORTIZ, KENNETH. 69, 178
ORTIZ, MARIA. 1467, 1713
OSORIO, JOSEPH. 918, 1545
OSSAREH, DIBA. 1746
OSWALD, JESSICA..... 737, 1059
OU, JOCELYN. 1752, 1812
OWEN, MICHAEL. 75, 282, 283
OZCAN, ALI..... 953, 1379

P

PACIS, NOAH. 1134, 1135
PACK, JOHN.....1747
PADE, KATHRYN. 1379
PADILLA, MICHELE..... 1135, 1136
PAGE, BIANCA. 935

M. Índice de proveedores de atención primaria

PAGE, BRADY. 654, 816, 1265
PAGE, JAIMIE. 1713
PAI, SARAH. 1136
PALOMAR HEALTH. 1644
PALOMAR MEDICAL CENTER. 1644
PALOMAR REHABILITATION INSTITUTE. 1645
PALOMINO, MARY. 92, 93
PANDHI, JAY. 980
PANDYA, BHUMIKA. 1758, 1812
PANEK, JOHN. 1455, 1456
PANICKER, CIBU. 253, 254
PANNARAJ, PIA. 1246
PANZARINI, BRUNO. ... 897, 1497, 1498
PAPASTERGIOU, GEORGIOS. 585, 637, 638
PAPPALARDO, ASHLEY. 1136
PARADISE VALLEY HOSPITAL 1645
PARAST, MANA. 861, 1355
PARIKH, MILIND. 152, 153, 378
PARIKH, RUPAL. 897, 1498, 1499
PARK, BRIAN. 953, 1380
PARK, JAY. 778, 1204
PARK, RONALD. 270, 1028, 1379
PARK, SOO. 799
PARK, TARI. 439
PARKER, LESLIE. 839
PARKS, MONICA. 1637
PARRY, LISA. 678, 911, 1534
PARSONS, GENEVIEVE. 201
PARSONS, MEKRAE. 1576
PARTNERS IN CARE FOUNDATION. 1895
PASCUAL, CHRISTOPHER. 610, 611, 728, 989
PASSIAK, BRITTANY ... 1022, 1300, 1307
PASSIAS, BRADEN. 924, 1552
PASTORES, GLEN. 1713
PATEL, AARTI. 1413
PATEL, BHAVESH. 502
PATEL, CHARMI. 861
PATEL, DEVIN. 1564
PATEL, GITANE. 1737, 1758, 1778, 1813, 1831, 1856
PATEL, JANKI. 660
PATEL, JITENBHAI. 179
PATEL, KELLY. 284
PATEL, PRIYA. 757
PATEL, SAGAR. 941, 1642
PATEL, SARJAN. 1737, 1758, 1777, 1812, 1831, 1855
PATEL, SHREYA. 642
PATEL, VIJAY. 670, 698, 949, 1026, 1349
PATHWAY HOME SOLUTIONS INC. 1880
PATIAG, DANIEL. 1136, 1137, 1138
PATTERSON, MARY. ... 960, 1389, 1390
PATTON, MICHAEL. 1714
PAUL, MEGAN. 1238
PAULSON, KERRY. 757
PAVLOVICH, WENDY. 439
PEARCE, ALEX. 1475
PEARSON, LAWRENCE. 195, 196
PEDROTTY, JOHN. 93
PELHAM, WILLIAM 882, 1683
PELIO, DARREN 676, 874, 875, 1437
PENALOSA, PATRICK 837
PEOPLE ASSISTING THE HOMELESS. 1893
PEREZ, ANGEL. 856, 1349
PEREZ, PERLITA. 94, 324
PERKINS, RACHEL 270
PERLMAN, TAMARA. 1017
PERREAULT, MARK. 875, 1437
PERRY, ARTHUR. 1793
PERRY, KATHERINE. 1138
PERRY, WILLIAM. 882, 1468, 1683, 1714
PERRY, YVETTE. 546
PERTL, URSULA. 540, 589, 701, 1028, 1380
PETERSEN, KATE. 1729
PETERSON, JONATHAN. 843, 1331
PETROVSKY, AUTUMN. 546
PETTUS, JEREMY. 788
PHADKE, OMKAR. 959, 1406
PHAM, BETTY. 825, 1286
PHAM, LILY. . 573, 688, 1017, 1204, 1205
PHAM, MARTIN. 561, 919, 1035, 1545
PHAM, NINA. 1747
PHAM, TONY. 1856
PHAN, TIFFANI. 407, 408
PHATAK, SONAL. 788, 1219
PHILLIPS, COTI. 1065
PHILLIPS, KATHERINE. 551
PHREANER, NICHOLAS. 744, 1076
PHUNG, AIVI. 1438, 1439
PHUNG, RICHARD N V. 1856
PIANSAY, MARIA CORAZON. .. 126, 127
PIERCE, HEATHER. 1413
PIEROS, JANELLE. 94
PINTO, ANITA. 169
PIRTLE, KEYSHONE. 624
PISINGER, PATRICIA. 95
PITTMAN, LILIANA. 650, 1602, 1603
PLANTE, CHARLES. 572
PLASCENCIA, CINDY. 1730
PLUCINIK, STANLEY. 1748
POAST, JENNIFER. 502, 503
POGGI, SARA. 1439
POHLEN, MICHAEL. 897, 898, 1499, 1500
POLESKY, ANDREA. 578, 1607
POLICH, MICHELLE. 1414
POLK, DAVID. 1233
POLLEMA, TRAVIS. 926, 927, 966
POLLEY, SHANNON. 1440, 1590
PONCE, SONIA. 1599
PONIACHIK, SAMUEL. 460, 461, 462
POOLE, DAVID. 1414
PORTO MADURSKI, KRISTINE. 1614
POSADAS, EMERITO. 473, 474, 475, 1583
POTENZA, BRUCE. 912, 1535
POTOK, OLIVIA. 809
POUNTNEY, MARLENE. 469, 470
POUSTI, BOBAK. 1037, 1038
POUSTI, SHEIVA. 1856
POWAY ADULT DAY HEALTH CARE CENTER. 1660
POWELL, STEPHANIE. 440
PRABHU, SUJATA. 1737, 1778, 1813, 1832, 1857
PRATT, STEVEN. 1794
PRESKILL, CATALINA. 440

M. Lista de médicos de atención primaria

PRESTERA, TORY. 1864
PRIEST, VIVIAN. 1440
PRINCE, RENEE. 1469, 1715
PRITZKER, JOELY. 1010, 1632
PROHASKA, THOMAS. 1076
PROMER, KATHERINE. 1608
PROPST, TOBE. 324, 325
PUIG-LLANO, MANUEL. 843, 1332
PUTRUS, RAMIZ. 140, 141
PYLE, ALEXANDRA. 1440

Q

QAYOUMI, WALI. 829, 830, 1301, 1684, 1715
QENDRO, ISABELLA. 1319
QIAN, ZHEN. 671, 698, 949, 1350
QUACH, PHUC. 1813
QUAN, MICHELE GRACE. 709
QUICK, ELISABETH. 594, 595, 1441
QUIJANO, GLENN. 1441
QUILALANG, SUSAN. 567, 568
QUINTERO, CAROLYN. 475, 1584
QUINTO, CINDY. 1139, 1140
QUIROZ, ELISA. 577
QURESHI, SOFIA. 490, 1606
QURESHY, ZOYA. 810, 1254

R

RACKHAM, KELLY. 721, 722
RADOJEVIC, NATASHA. 1469, 1715
RADY CHILDRENS HOSPITAL SAN DIEGO. 1645
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN. 1900, 1901, 1902, 1903, 1904, 1905, 1906, 1907, 1908, 1909, 1910, 1911, 1912, 1913, 1914, 1915, 1916, 1917, 1918, 1919, 1920, 1921, 1922, 1923, 1924, 1925, 1926, 1927, 1928, 1929, 1930, 1931, 1932
RAGUVEER, VISHAKA. 325
RAHIMI, NASSRIN. 1639
RAHMAN, AKBAR. 95, 96
RAISSI SHABARI, FARSHAD. 1068, 1069
RAJADHYKSHA, SALOMI. 1814
RAJAEI, NILOUFAR. 1140
RAJAIPOUR, NEGIN. 491, 492
RAJARATNAM, AKASH. 475, 476
RAJIV, RENUKA. 725, 1140
RALEIGH, DEBORAH. 757, 1141
RALL, EMILY. 1441, 1442
RAMAMOORTHY, SONIA. 912, 1534
RAMERS, CHRISTIAN. 379
RAMGREN, AILEEN. 275
RAMIREZ SANCHEZ, CLAUDIA. 503
RAMIREZ, ALFREDO. 927
RAMIREZ, LINDA. 546
RAMIREZ, NICOLE. 764, 1171
RAMNATH, VENKTESH. 654
RAMOLIA, ANIKA. 1741
RAMOS, ELENA. 1033
RAMOS, JACQUELYN. 643
RAMSIS, MATTHEUS. 656, 1077
RANA, DEBORAH. 237, 238
RANADIVE, SAYALI. 672, 703, 957, 1030, 1390
RANASURIYA, DUNISHA. 954, 1380
RANDALLS, JESSICA. 1033
RANGEL, HANNELORE. 547
RAO, APARNA. 959, 1404
RAO, SOUMYA. 1043
RAO, USHA. 179, 180
RASCHKE, ROBIN. 673, 959, 1030, 1401
RASHID, SAMAR. 326
RASMUSSEN, DALE. 1442
RAWANI-PATEL, PRITI. 954, 1381
RAYTA, NICOLE. 1011
RCH NORTH COUNTY URGENT CARE. 1932
READ, TRENTON. 600, 708, 1043
REAL, MARIA. 624, 625, 975
REALYVASQUEZ, JOHN. 573, 688, 1018, 1205
REDDY, ARJUN. 153
REDDY, DANA. 1528, 1529
REDDY, NAVYA. 688
REDDY, REDDIWANDLA. 929
REDDY, SUMANA. 561, 562, 616, 1598, 1599
REEVES, JAMES. 1541
REEVES, RYAN. 819, 1274
REGEV, SHANEE. 625
REID, EMILY. 626, 975, 1141
REIFENBERGER, JODY. 1046
RESNIKOFF, PAMELA. 379
REVELES, DIANA. 595
REYNOSO, ALFONSO. 573
RHEE, KYUNG. 1414
RHYNER, GINA. 1172
RIBEIRO CALDAS DOMINGUES, ISABEL. 1716
RICE, ELIZABETH. 557
RICHARD, MARLA. 1684, 1716
RICHARDS, KRISINDA. 1011
RICHARDSON, ANGELIQUE. 800
RICHARDSON, DANIELLE. 223
RICKERTS, MATTHEW. 1523
RICKMAN, CHRISTOPHER. 898, 1500
RIDGE, NEAL. 326, 1224
RIEDL, MARC. 1048
RIEGO, SUZANNE. 1141
RIES, DAVID. 1415
RIFKIN, DENA. 826, 1288
RIGGINS, NINA. 1301
RILEY, JEREN. 1142
RIOS, SIERRA. 1672
RIVERA, KEVIN JOHN. 1667, 1716, 1717
RIVERA, TANIA. 380
ROBERTS, AUDREY. 875, 876, 1442
ROBERTS, CALE. 1381
ROBERTS, KENDALL. 201
ROBERTS, POMAI. 223, 224, 979
ROBINSON, ADAM. 898, 1501
ROBINSON, DAISY. 196, 723
ROBINSON, DEAN. 687
ROCHE, CHELSEA. 758
RODENMEYER, EVE. 1142
RODRIGUES, ANNETTE. 677, 707, 963, 1034, 1443
RODRIGUEZ JEREZ, ROBERTO. 1611
RODRIGUEZ, ALDO. 170, 516, 1613
RODRIGUEZ, CASSANDRA. 611
RODRIGUEZ, JAVIER. 440, 441
RODRIGUEZ, SEAN. 327
ROGERS, MATTHEW. 69, 70, 555
ROGERS, TANYA. 284, 285

M. Índice de proveedores de atención primaria

ROJAS, RICHARD. 1185
ROJAS, SARAH. 96, 492
ROMA, ANDRES. 864, 1358
ROMERO, CAMILA. 1459, 1460, 1461
ROMO, JORGE. 876
RONAN, KEVIN. 270, 271, 272, 540
ROSADO, IVAN. 327, 1224
ROSE, PATRICIA. 524, 525
ROSENBLATT, EUGENE. 96, 97
ROSENBLATT, SHERILYN. 643
ROSS, COLLIN. 1615
ROSS, CRYSTAL. 568, 569, 1143
ROTMAN, YONATAN. .. 899, 1501, 1502
ROUEL, WADI. ... 153, 154, 230, 380, 381
ROURKE, KYLE. 1205
ROWHANI, NAGHMEH. ... 127, 128, 590
ROZELL, JOSEPH. 899, 1502
ROZO, JOSE. 1143
RUBENSTEIN, STUART. 441
RUBENZIK, TAMARA. 661, 802, 1242, 1243, 1637
RUDD, CHRISTOPHER. 908, 1524
RUDOLF, FRANCES. 652, 779, 1206
RUELAS, ROBERTO. 516, 517
RUNGVIVATJARUS, TIRANUN. 1415
RUSSELL, MARIE. 462, 463
RUSSELL, SAMUEL. 1029, 1381, 1382
RUSSO, KRISTA. 1591, 1592
RYAN, DANA. 65, 198
RYAN, KYLE. 704, 962, 1032, 1416
RYAN, RHIANNON. 1225
RYU, JULIE. 1404, 1405

S

SAADA, HASSAN. 658
SABHA, MAHMOUD. 779, 1206
SABIN, NANCY. 1144, 1145, 1146
SACHS, MELISSA. 1686, 1718
SACKS, BRENT. 764, 1172
SADAT, SAYED. 899, 1502, 1503
SADDA, REEM. 1669
SADLER, CHARLOTTE. 1206
SADRE, SARAH. 954, 1382
SAFI, ROOZCHEHR. 254, 255
SAHA, SRISHTI. 810, 1254
SAHMS, TIMOTHY. 517, 518
SAID, MENA. 934
SAIDRO, LUZVIMINDA. 70
SAJTI, ENIKO. 825, 1286
SALAMANCA, OMAR. 1018
SALAMATIPOUR, ASHKAN. 192, 193, 255, 256, 535, 536, 1018, 1019, 1635, 1636
SALAS GAERLAN, JESSICA. 1046
SALAZAR, CLAUDIA. 1592, 1593, 1594, 1595
SALAZAR, JUANITA. 128
SALEH, FAREED. 1382
SALEM, RAMSEY. 141
SALES, JAN ERIC. 1524
SALINAS, NIECEL. 758, 1146
SALO, STEPHANIE. 1469, 1718
SAMHA, LEEN. 779, 1206
SAMI, REMAN. 106
SAMPATH, SRIVIDYA. 442
SAMUEL, MICHAEL. 1767, 1778, 1814
SAN DIEGO FAMILY CARE. 51, 1893
SAN DIEGO FAMILY CARE, ... 352, 353
SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE. 1661
SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE. 1871, 1874, 1875
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE. 47
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE, ... 353
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE. 29
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE, ... 65
SAN YSIDRO HEALTH CHC - OCEAN VIEW. 55
SAN YSIDRO HEALTH CHC - OCEAN VIEW, ... 353
SAN YSIDRO HEALTH CHULA VISTA. 31
SAN YSIDRO HEALTH CHULA VISTA, ... 104, 105
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED. 46, 47
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED, ... 354
SAN YSIDRO HEALTH EL CAJON. ... 33
SAN YSIDRO HEALTH EL CAJON, . 145
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE. 33
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE, ... 183
SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE. 38
SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE, ... 199, 200
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR. 59
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, ... 495, 496
SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE. 29
SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE, ... 71
SAN YSIDRO HEALTH NATIONAL CITY. 40
SAN YSIDRO HEALTH NATIONAL CITY, ... 228
SAN YSIDRO HEALTH OTAY. 30, 31
SAN YSIDRO HEALTH OTAY, ... 105
SAN YSIDRO HEALTH PARADISE HILLS. 39
SAN YSIDRO HEALTH PARADISE HILLS, ... 228, 229
SAN YSIDRO HEALTH PRECISION PARK. 52
SAN YSIDRO HEALTH PRECISION PARK, ... 354
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER. 58
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, ... 496
SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE. 59
SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE, ... 520
SAN YSIDRO HEALTH SOUTH BAY. 40
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS. 31

M. Lista de médicos de atención primaria

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS, ... 106
SAN YSIDRO HEALTH SOUTH BAY, ... 229
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS. 58
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS, ... 496
SANACORA, RACHEL. 1011, 1146, 1147
SANCHEZ, AMBER. 827
SANCHEZ, MICHAEL. 876
SANCHEZ, MYRNA. 1603, 1604
SANDERS, JESSICA. 549, 550
SANDHU, BASANT. 180
SANDIFORD, PATRICK. 780, 1207
SANDLER, BRYAN. 1542
SANDOC, EMILY. 1857
SANDOVAL, KATE. 547
SANTANGELO, JOANNE. 1147, 1148, 1149
SANTIAGO, AMANDA. 1012, 1013
SANTIAGO, ROXANE. 129
SANTIAGO-LASTRA, YAHIR. 1564
SANTORELLI, JARRETT. 914, 1542
SANTOS CAVAIOLA, TRICIA. . 789, 1219
SAPRA, SONIA. 114, 161, 162, 211, 408, 409, 410, 530
SARDINHA, MANUEL. 1225
SATTERWHITE, MAURINE. 1149, 1150, 1151
SAUER, CHARLES. 663, 691, 825, 826, 1039, 1287
SAUNDERS, DENISE. 569
SAURE, MELISSA. 1172
SAVA HOME. 1657
SAVILLE, EDITH. 1151
SAWHNEY, NAVINDER. 681
SAWIRES YAGER, AMANDA. 1152
SAWYER, CAROLYN. 1415, 1718, 1719
SCHELLIE, SCOTT. 1443, 1444
SCHELLINGER, KRISTON. 1470, 1719
SCHIEDERMAYER, BENJAMIN. 910, 1531
SCHLOSSER, TARA. 1719
SCHMIDT, BRYAN. 1524, 1525
SCHMITT, EVA. 1444
SCHNEEBERGER, ANDRES. 1685, 1720
SCHNEIDER, SARAH. .. 600, 1456, 1457
SCHNEIDER-MUNOZ, MARGARITA. 504
SCHNEIR, AARON. 780, 781, 1207
SCHROEDER, JENNIFER. 1444, 1445
SCHROTER, STEPHANIE. 955, 1383
SCHUH, ALTAIRA. 1152
SCHULTE, JESSICA. 830
SCHULTZ, HEATHER. 900, 1503
SCHULZ, STEFAN. 1445
SCHUMAKER, EDWARD. 142, 143, 224, 328
SCHWAB, GARY. 1337
SCHWARZ, KATHLEEN. 1394
SCOTT, JEFFREY. 1759, 1814, 1832
SCOTT, RYLEE. 328
SCOTT, TIFFANY. 764, 1172, 1173
SCOTT-WYARD, PHOEBE. 962, 1417
SCOVILL, ALEXANDRA. 587, 1748
SCRIPPS GREEN HOSPITAL. 1645
SCRIPPS MEMORIAL HOSPITAL. 1646
SCRIPPS MEMORIAL HOSPITAL ENCINITAS. 1646
SCRIPPS MERCY HOSPITAL. 1646
SCRIPPS MERCY HOSPITAL CHULA VISTA. 1646
SEARLEMAN, ADAM. 900, 1504
SEARS-WILEY, ELIZABETH. 1153
SEAWELL, CHRISTINE. 1019
SEBASKY, MEGHAN. 810, 1255
SEBIANE, MARIA. 477, 478
SEBRING, JAN. 285, 286
SEBSO, JODI. 442, 443
SEDGHI, SOUDABEH. 924, 1552
SEFA-BOAKYE, KOFI. 115, 512
SEGAL, LAUREN. 781, 1207
SEITZ, GRETCHEN. 1084
SELBY, BLAKE. 1153, 1154
SELECT SPECIALTY HOSPITAL SAN DIEGO. 1647
SELF, MICHAEL. 1208
SELTZER, JUSTIN. 781, 782, 1208
SENFT, AMANDA. 1729
SEO, CHANMEE. 1607
SERENO, EMILY. 557, 563, 1066
SERHAN, STEPHANIE. 876, 1445
SERIO, TAYLOR. 1720
SERPAS, SHAILA. 97
SERRA, NATALIE. 1173
SHABAIK, AHMED. 865, 1358
SHAH, NIYATI. 170, 660
SHAH, SHAILJA. 794, 1233
SHAH, SONA. 585
SHAH, SONALI. 1059
SHAHIDYAZDANI, TINA. 518
SHAHTAJI, ALAN. 492, 493
SHAPIRO, HILARY. 745, 1077, 1078
SHAPIRO, RACHEL. 1445
SHARMA, ANITA. 958, 1394
SHARP CHULA VISTA MED CTR. . 1647
SHARP CORONADO HOSP AND HEALTHCARE CTR. 1647
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS. 1647
SHARP MEMORIAL HOSPITAL. 1647
SHARPE, NORMA. 553, 556, 707, 1446
SHASTA HOME. 1653
SHAUF, JOANN. 1618
SHAW, BLAKE. 1332, 1333
SHAW, SUSANNA. 737, 1059
SHEIKH, ZARA. 329, 330
SHEIKH-MOHAMED, HALA. 155
SHELTON, ALYSSA. 1323
SHEN, JIA. 1078, 1079
SHENOY, ASHVIN. 443
SHERER, KIMBERLY. 589, 701, 1029, 1383
SHEREV, DIMITRI. 580, 635, 929, 1079
SHERMAN HEIGHTS FAMILY HLTH CTRS INC. 47
SHERMAN HEIGHTS FAMILY HLTH CTRS INC, ... 354, 355
SHETH, HASMUKH. 129, 444
SHETH, SARIKA. 955, 1383
SHI, VERONICA. 1191
SHIAU, NANCY. 444
SHIEH, ALVIN. 712
SHIELDS, SEBASTIAN. 1667

M. Índice de proveedores de atención primaria

SHIH, JERRY. 830, 1302
SHIRAKI, JEAN. 330
SHISHLOV, KIRILL. 782, 1208
SHMARIAHU, SHELLY. 1515
SHMERLING, ALISON. 1225, 1226
SHOLLY, ALLISON. 1738, 1759, 1767, 1778, 1794, 1815, 1832, 1857
SHORT, ABIADE. 115, 116
SHU, I WEI 1720
SHULKIN, MITCHELL. 1858
SHUMILAK, KAILI. 330, 331
SHWAIKI, OMAR 900, 1504, 1505
SIETSMA, ALEXANDRA. 1154
SIEVERING, DENISE. 905, 1516
SILVA ENCISO, JORGE. 729, 1047, 1080
SIMEONE, DIANE. 914
SIMMONS IV, ROBERT. 1687
SINGH, PUJA 957, 1390
SIRIPHAND, CHRISTOPHER. . 811, 1255
SIVA, TENAYA. 181
SKAF, AYHAM. 586, 638, 1333, 1611, 1612
SKALSKY, ANDREW. 962, 1417
SKAY, RICHARD 1865
SKINNER, NICOLE. 908, 1525
SKOPEK, TAM. 1632, 1633
SLATER, JERRY. 901, 1505
SLOANE, CHRISTIAN 782, 1209
SMITH, CASEY. 782, 783, 1209
SMITH, CHELSEY. 811, 1255
SMITH, DOUGLAS. 1615
SMITH, KELLI. 723, 937
SMITH, TREVOR. 877, 1446
SMOOT, CHARLES. 331, 332
SNOOK, BRIAN. 224, 225
SNOW, ERICA. 737, 1060
SNYDER, BRIAN. 783, 1210
SNYDER, CHRISTOPHER. 332
SNYDER, MICHELLE. 939
SOCHA, TRACI. 479
SOLIS, KEVIN. 1748, 1867
SONG, CAROL. 1625
SONG, JOYCE 189
SONG, WEI. 1358, 1361
SOPHY, ELIZABETH. 333
SORIA JIMENEZ, CESAR. 819
SORIA LOPEZ, JOSE. 583, 636, 1582
SORIA, CLAIRE. 738, 1060
SOROKIN, LISA. 839
SOSA, DAVID. 629, 630, 1185, 1186
SOTO MAYA, ANAYELI. 685
SOUDER, CHRISTOPHER. 955, 1383, 1384
SOZANSKI, JESSE 1472
SPAK, DARYL. 97, 98, 575
SPARKS, CHELSEA. 901, 1505, 1506
SPARKS, TODD. 611, 612, 728, 990
SPENCE, JAMIE. 1595, 1596
SPENGLER, NATHAN. 901, 1506
SPERRY, TASHIA. 596
SPEZIALE, MARK. 582, 1287
SPITZER, MARSHA. 445, 446
SREJIC, UNA. 1060
SRIDHAR, SUNITA. 1397
SRILASAK, MICHELE 658, 758, 1633
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER 56
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, ... 355
STABEN, REBECCA. 116, 162, 212, 410, 411, 412, 530, 531
STAHL, KEVIN 612, 613
STALEY, MICHAELA. 493
STALLINGS, ANDREA. 1446
STEINBERG, LEONARD. 1367
STENSMAN, LARS. 66
STEPENOSKY, JAMES. 902, 1507
STEPHENS, ABBY 547
STEPHENS, LAURA. 1358, 1361
STEPHENSON, SAMUEL. 915, 1543
STERN, MARLEIGH. 1191
STEVENSON, REHEIA. 758, 939
STEWART, TYLER. 800
STIPHO, SALLY. 1233, 1234
STOJANOVSKA, JOVANA. 722
STONES, RACHEL. 225
STORMS, JADE. 547
STOVER, LAURIE. 1415
STRAKA, CHRISTOPHER. 1477
STRAZICICH, KARLA. 189, 190
SUBRAMANIAN, RAMA. 447
SULEIMAN-QAFITI, KHAWLA. 447
SULLIVAN, ELISSA. 518, 519
SUMMERS-DAY, COURTNEY. 333, 334
SUN, ALEX. 902, 1507, 1508
SUNA-SITTO, MOHEEN 1615, 1616
SURESH, KRISH. 1350
SURI, RAJAT. 964, 1643
SUSAN PARHAM HOUSING CORPORATION. 1657
SUTHERLAND, ANNA 1192
SUTHERLAND, PAIGE. 1668, 1685, 1721
SUTTON, BRIAN. 677
SUYDAM, STEVEN. 738, 1061
SWAN, MELANIE. 133
SWANSON, BRIANNA. 1155
SWARTZ, ERIN. 1155
SWARTZ, JOHN. 98, 334
SWEAT, MARIE 1303
SWEENEY, DANIEL. 652
SWEENEY, NATHALY. 691, 1288
SWEET, JASON. 1508
SWEET, PATRICK. 493, 494
SWORDS, KELLY. 1564
SYED-UDDIN, SUMIYAH. 940

T

TA, MINI. 1858, 1865
TA, TRANG. 1858
TABAREZ, NORMA. 651
TADDONIO, MICHAEL. 903, 1508, 1509
TADROS, ANTHONY. 903, 1509, 1510
TAFRESHI, GILDA. 1303
TAGHIZADEH, BEHZAD. 931
TAGHIZADEH, MAJID 1186, 1187
TAHRIRI, BAHAREH. 1597, 1598
TAI, KUANGKAI. 275
TAING, JENNIFER. 1155
TALAVERA, GREGORY. 99, 494
TALBOT, ADRIANNE. 1156
TAM, JODI 1525
TAM, MAY. 1858
TAMAS, VANESSA. 1384

M. Lista de médicos de atención primaria

TAMAYO, MAITHE. 447, 448
TAN, CARMELA. 877, 1447
TAN, LO FU. 494, 495
TANAKA, HIDEAKI. 652, 783, 1210
TANAKA, MARY. 74
TANG, ANDREW. 956, 1384
TANG, MICHAEL. 804
TANGELO. 1871
TANTISIRA, KELAN. 1405
TAPIA, ASHLEY. 1730
TARLE, STEPHANIE. 882, 1470, 1685, 1721
TARSA, MARYAM. 413
TARVER, LESLIE. 1685
TAUB, PAM. 745, 820
TAVASSOLI, SARA. 1738, 1759, 1768, 1779, 1794, 1815, 1833, 1859
TAYLOR, DAVID. 811, 1255
TAYLOR, KAYLA. 286, 287
TAYLOR, TASHA. 519
TCHAKMAKJIAN, LEVON. 155
TECOMA, EVELYN. 831, 1303, 1304
TEETER-WITT, ALYSSA. 709, 1673
TEJEDA, FRANCISCO. 497
TELLECHEA-SANCHEZ, SELMIRA. 190
TERRY, AMANDA. 172
TESSIER, ADLA. 381
TEW, JOHN. 1784
THACH, TERILYN. 1779
THACKABERRY, JESSICA. 1721
THAI, AMANDA. 1865
THAI, JUSTIN. 335
THAN, CINDY. 1741
THANGARAJAH, HARIHARAN. 554, 965, 1555
THAPER, MOHINDERPAL. 1039
THAYER, KARISA. 230, 231, 980
THOMAS, KELSEY. 883, 1685, 1686
THOMAS, KIMBERLY. 596, 1616
THOMAS, ROBERT. 1256
THOMAS, THEA. 877, 878, 1447, 1448
THOMAS, ZACHARY. 336
THOMPSON, COURTNEY. 1156
THOMPSON, ELLA. 547
THOMPSON, KYLE. 680, 713, 965, 1036, 1555
THOMSON, SAMANTHA. 837, 838, 1320
THYGERSEN, ALAYSA. 1619
TILLMAN, SYLVIA. 1816, 1859
TILTON, PETER. 1722
TITANIUM HEALTHCARE. 1875
TO, BRITTANY. 1738, 1759, 1779, 1794, 1816, 1833, 1834, 1859
TO, TUAN. 1471, 1722
TOCCO, JESSICA. 764, 1173
TODD, MIKAYLA. 550, 685, 686, 1156, 1619
TODD, SARAH. 702, 1029, 1385
TOLBA, KAMEI. 173
TOLBERT, GERALD. 783
TOLEDO-NADER, CAROLL. 99
TOLMIE, SIMONE. 1179
TOMASZEWSKI, CHRISTIAN. 784, 1210, 1211
TOMIKA, TIFFANY. 1740, 1748, 1749, 1760, 1817, 1821
TOMLIN, JEFFREY. 1545
TON-NU, MY LINH. 1739, 1760, 1768, 1780, 1795, 1817, 1834, 1860
TONG, KIM. 759, 1157
TONNU, ANH. 1760, 1795, 1817, 1860
TOPALOVIC, HANNAH. 1525
TORRES BARBA, DAVID. 820, 1274
TORRES, ELSA-LUCIA. 1611
TORRES, ERICK. 784, 1212
TORRES, MICHAEL ANDREW. 990
TORRES, RANDALL. 553, 1664
TOTH, JESSICA. 204, 205
TOTTON, GABRIELLE. 1041
TOUBIA, ELIAS. 1749, 1834, 1867
TRAJANO, CHARMINE. 1740, 1749, 1750, 1795, 1796, 1860
TRAN, ALEXANDER. 1780, 1861
TRAN, HAN. 765, 1174
TRAN, HAO. 730, 1256
TRAN, KELLY. 1157
TRAN, KIM. 979
TRAN, LINH. ..654, 816, 942, 1266, 1643
TRAN, MICHAEL. 1861, 1866
TRAN, THAO. 1869
TRAN, THERESA. 956, 1385
TRAN, TU-UYEN. 1622
TRAN, UYEN-THAO. 336, 337
TRANG, CHAU. 1861
TREJO, ANA. 759, 1158
TREJO, RAUL. 100
TRESSLAR, PERI. 569
TREUNER, JULIE. 1448
TRI CITY MEDICAL CTR. 1648
TRIMM, CASSIDY. 908, 909
TRINGALE, KATHRYN. 1477
TRINH, RACHELLE. 1750
TRIPPITELLI, CAROL. ... 1689, 1731, 1732
TRIVEDI, SURAJ. 738, 1061
TROYER, EMILY. 1668, 1723
TRUECARE. 30, 33, 44, 45, 57, 58
TRUECARE, .72, 171, 258, 259, 275, 456, 457, 458
TRUJILLO, DALE. 760
TRUJILLO, JENNIFER.. 116, 117, 413, 414
TRUJILLO, MIGUEL. 596, 597, 1616, 1617
TRUONG, NHA. 337
TRUONG, VENNES. 1187
TSAI, MATTHEW. 795, 1234
TSUCHIYA, KIMIKO. 337, 338
TSUDA, PAIGE. 739, 1061
TSUI, NANCY. 1818
TU, BEVERLY. 1818
TU, CHARLES. 1862
TU, MONIQUE. 1062
TUCKER, LANIKA. 760, 1158
TUEROS, VICTORIA. 1158, 1159
TULLY, JEFFREY. 739, 1062
TUNG, VIVIAN. 202
TURNER, ERIC. 643, 644, 1622, 1623
TURNER, SHEREENA.. 644, 1448, 1449
TURRILL, MCKENNA. 1818
TWAMLEY, ELIZABETH. 1471, 1723
TZENG, ERIC. 739, 1062

U

U, HOI. 919, 1546

M. Índice de proveedores de atención primaria

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER. 1648
UCSD LA JOLLA JOHN SALLY THORNTON.....1648
UCSD MEDICAL CTR. 1648
UCSD MEDICAL GROUP, ...385
UDOH, EKAETE. 1449
ULRICH, STACEY. 1385
UNG, HOAMENG..... 831, 1304
UNGER, LINDSEY. 911, 1531
UNTERBERG, STEPHEN. 1565, 1566
UREY, MARCUS. 730, 1275
UTZ, JACK. 495
UY, ASHLEY. 630
UY, CARMELITA.....238

v

VAHABZADEH-HAGH, ANDREW.856, 857, 1350, 1351
VAHDAT, NOUSHIN. 903, 1510
VAIDYA, KAMALA.589, 702, 1030, 1386
VAIL, DANIEL. 843, 844, 1334
VAISMAN, SAMANTHA. 613, 728
VAKILIAN, SIAVOSH.710, 1477, 1510, 1511
VALDEZ, KRYSTAL ANGELI. 382
VALENCIA, MARILES. 130, 238
VALENZUELA, TRICIA.....338
VALLIDO, CHRISTIAN BORGE. 1723
VALMARROSA, GILDA. 548
VALSAINT, JOSIANE. 548
VAN DER LINDE, HARRISON. 1862
VAN DYKE, JASON. 1526
VAN HOLLEBEKE, RACHEL. 64
VAN HOOSE, MARC. 1862
VAN NOSTRAND, KERIANN.884, 1475
VAN PRATT LEVIN, BENJAMIN. .. 1226
VAN WOY, LAUREN. 1386
VANDEWIELE, EMILY. 1526
VANE, JACKSON. 1387
VANETSKY, GARY. 677
VARGAS TRUJILLO, MARCELA.961, 1391
VARGAS, BRIANDA. 548
VARGAS, CHRISTOPHER. 597, 598
VARGAS, ROBERT. 1449, 1450
VARGAS, YASHIA. 1724
VARON, SHIRA. 1320
VASQUEZ, BENJAMIN. 909, 1526
VAUGHAN, ROBERT. 1013, 1014
VAUGHN, GABRIELLE. 1367
VAVINSKAYA, VERA. 865, 1359
VAYNGORTIN, TATYANA. 1387
VAZQUEZ-ERLBECK, MARTHA. ..1604
VCC DURIAN. 60, 61
VCC DURIAN, ...536
VEGA, CAROLINA. 956, 1387
VEGA, TERESA. 75, 76, 287, 288
VELASQUEZ, GABRIELA. 101, 102
VELASQUEZ, SHARON. ... 100, 101, 226
VELAZQUEZ CAMARENA, MARIA DELCARMEN. 109
VENTRO, GEORGE. 912, 1535
VERDUZCO GONZALEZ, AURORA. 626, 976
VERISSIMO, TAYLOR. 614, 729
VERRET, ERIC. 1780
VETTICADEN, SANTOSH. 185
VIA RIO HOUSE. 1653
VIBAL-POASTER, MARIA KHRISTINA. 1159
VIDAL, MONICA. 256, 257, 258
VIDAURRAZAGA, MONICA. 382
VIETEN, CASSANDRA. 1472, 1724
VILLA, ANGELICA. 1750
VILLALOBOS, REBECA.....1159, 1160
VILLANUEVA DE GUTIE, BERENICE. 627, 976, 977
VILLANUEVA, GIOVANNI.614, 729, 990
VINCENT, BERLIN. 1174
VINH, JOHN.1760, 1768, 1796, 1819, 1835
VISTA COMMUNITY CLINIC.35, 36, 37, 41, 42, 43, 44, 1897
VISTA COMMUNITY CLINIC GRAPEVINE..... 61
VISTA COMMUNITY CLINIC GRAPEVINE, ... 537
VISTA COMMUNITY CLINIC HORNE STREET..... 44
VISTA COMMUNITY CLINIC HORNE STREET, ... 260, 261
VISTA COMMUNITY CLINIC PIER VIEW WAY. 45
VISTA COMMUNITY CLINIC PIER VIEW WAY, ...261
VISTA COMMUNITY CLINIC, .194, 195, 259, 260
VISTA HOUSE. 1657
VO, ANDREW. 846, 1337
VO, ANDREW MINH. 1796, 1863
VO, LISA. 1740, 1751, 1761
VO, PHU LUONG. 1226
VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION.....1894
VONGFAK, HAMMINA. 548
VOSSLER, JOHN. 1561
VU, PETER. 800, 1239
VU, WENDY. 196, 197

w

WAGONER, KENYADA. 1674
WAHLIN, TAMARA. 878, 1450
WAKAM, GLENN. 1542
WAKEFIELD, CHANTAL. 765, 1174
WALDRUP, LA RHONDA. 686, 1160
WALKER, ALEXANDRA. 1014
WALKER, JULIE. 1527
WALKINS, BETHANY.659, 686, 940, 1014, 1160
WALLACE, STEPHANIE.....1639
WALSH, EMILY..... 1675, 1724
WALSH, JOHN. 707
WANG, ANGELA. 811, 1256
WANG, DEHUA. 1359
WANG, HUAN-YOU.800, 801, 1239, 1240
WANG, LAWRENCE.....903, 1511
WANG, MICHELLE..... 739
WANG, REGINA. 338, 339
WANG, VINCENT.....1388
WANG, XINYU. 1048
WANG, YVETTE. 1388
WANG-GIUFFRE, ELIZABETH. 1367
WARDI, GABRIEL..... 655, 785, 1212

M. Lista de médicos de atención primaria

WASHINGTON, KRYSTAL. 548
WASSON, MINA. 449
WASTILA, LISA. 383
WATERS, ELIZABETH. 449
WATHEN, JOSHUA. 238
WATSON, DEBORAH. 857, 858, 1351, 1352
WATTANAMANO, PORNTHEP. 383, 384
WATTS, ELI. 384
WAYMENT, ANDREW. 785, 1212
WEATHERLY, JACOB. 449
WEAVER, AMANDA. 1670
WEAVER, APRIL. 1639, 1640
WEBB, SHANNON. 1451
WEBSTER, LUKE. 1257
WEICKERT, MARIA. 1161
WEIMER, BRYANA. 1161, 1162, 1163
WEIR, JACQUELINE. 879, 1451
WEISSBROD, PHILIP. 858, 859, 1352, 1353
WEISSMAN, CORY. 1725
WELSH, RAYMOND. 904, 1512
WEN, AKI. 102
WERNER, R AARON. 1761
WERNER, REX. 1761
WEST, JULIE. 943, 1040, 1288
WESTERN ADULT DAY HEALTH CARE CENTER. 1659
WETTERSTEN, NICHOLAS. 730, 821, 943, 1275
WHARRAM, JENNIFER. 1640
WHEELER, KIM. 646, 1670
WHITE, KYLE. 934
WHITLEY, NICHOLAS. 102, 103
WIENER, GREGORY. 576
WIETZKE, MATTHEW. 1163
WIJAYARATNE, IMANIE. 601, 1668
WILAND, WINONA. 560
WILCOX, WENONAH. 563
WILKIN, TIMOTHY. 1246
WILKINS, MARJORIE. 649
WILKINSON, MICHAEL. 745, 1080
WILLIAMS, BREAHNA. 627, 977, 1163
WILLIAMS, JESSICA. 1531
WILLIAMS, JINA. 1633
WILLIAMS, MATTHEW. 951, 1368
WILLIAMS, STACY. 910, 1527
WILLIAMS, TAKISHA. 570, 628, 936, 1164, 1621
WINDHAM, SUZONNE. 1015, 1016
WINESBURG, JENNIFER. 232, 982
WINKLER, GARRET. 785
WINTERS, KATHRYN. 802, 1243
WITCZAK, IZABELA. 459, 460, 1580
WITUCKI, PETER. 785, 786, 1213
WOELKERS, DOUGLAS. 662, 823
WOLF, CELIA. 288
WOLFE, AMANDA. 1037
WONG, GORDON. 1863
WONG, HENRY. 767, 1192
WONG, IAN. 450
WONG, JUSTIN. 812, 1257
WONG, RICHARD. 861, 1355, 1359
WONG, VICTOR. 1397
WONG, YOLANDA. 450
WOO, ANDY BON. 1165
WOO, JASON. 1566
WOODIN, KAREN. 659, 686, 765
WOOLSEY, EMILY. 725, 1165
WRIGHT, KIMBERLY. 1037
WU, EVA. 1835
WU, JENNIFER. 339
WU, VICTORIA. 831, 1304
WYLIE, BLAKE. 64, 200

X

XUE, JAY. 1560

Y

YADAV, GHANSHYAM. 414
YADLAPATI, RENA. 812
YAGUDAYEVA, RAISA. 1725
YAMADA, KENTARO. 1334
YAMANE, MAYA. 669, 695, 947, 1024, 1334, 1335
YAN, CAROL. 859, 860, 1353, 1354
YANG, JENNIFER. 1304
YANG, JENNY. 812, 1257
YAO, CATHERINE. 130
YAPHOCKUN, KAREN KIM. 1388
YELA CASTILLO, ANA. 1690
YELLEN, LAURENCE. 930
YELON, JAY. 1543
YEO, ALEXANDRIA. 659, 760
YIDI, DIANA. 1725
YIM, WESLEY. 957, 1388
YIN, JANE. 904, 1512, 1513
YOO, RAPHAEL. 1513
YOON, RYAN. 103
YOON, TAE HYUN. 156
YOU, ALAN. 786, 1213
YOUNAN, LAWRENCE. 740, 1062
YOUNG, ALLA. 1752, 1819
YOUNG, JENNIFER. 72
YOUNG, JOCELYN. 673, 1394
YOUNG-PEN, TONI. 1452
YOUSSEF, FADY. 795, 1234
YU, AUDRINE ALANNA. 910
YU, CAROL. 846, 847, 1338, 1797, 1863
YU, ELAINE. 787, 1213, 1214
YU, HELENA. 1398
YU, JENNIFER. 1398
YUNG, DORIS. 276, 277
YUNG, STEVEN. 384, 385

Z

ZABLIT, KARIM. 1335
ZAERPOOR, DARA. 740, 1063
ZAGE, PETER. 1398
ZAHEER, AARON. 450, 451
ZAHLER, MARVIN. 340
ZAIDI, NOORINA. 669, 696, 1739, 1762, 1780, 1797, 1819, 1820, 1835, 1836, 1864
ZALE, CHELSEA. 1305
ZAMORA, JESUS. 904, 1514
ZARE, SOMAYE. 865, 866
ZARGAR, SHABNAM. 130
ZAYAS, MARIO. 1726, 1730
ZECHA, RONALD. 687
ZHANG, HAIYAN. 866
ZHANG, SHERRY. 813, 1258
ZHAO, TAILUN. 1762, 1768, 1781, 1798
ZHONG, YAN. 1289
ZHOU, JENNY. 1239
ZIEG, ALAN. 117, 163, 212, 213, 415, 416, 417, 418, 531

M. Índice de proveedores de atención primaria

ZIMBRIC, MICHAEL. 692, 1305, 1306
ZINK, IRENE. 340
ZLATAR, ZVINKA..... 883, 1686
ZUBAIR, RAHEEL..... 557, 1192
ZVANUT, DONALD. 1762, 1769, 1781, 1798, 1820, 1836

Notes

Notes

Dirección postal:
Blue Shield of California Promise Health
3840 Kilroy Airport Way
Long Beach, CA 90806

Servicio al Cliente
(855) 699-5557, de 8:00 a. m. a 6:00 p. m.,
de lunes a viernes

Línea TTY de ayuda para personas con problemas de audición
(a través del Servicio de Retransmisión de California) 711,
de 8:00 a. m. a 6:00 p. m., de lunes a viernes

blueshieldpromise.com

DIR50528-SD-SP 02/26

Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association

blue california

Promise Health Plan
Blue Shield of CA Promise Health
PO Box 4317
Woodland Hills, CA 91365-4317

PRESORTED
BOUND PRINTED
MATTER
U.S. POSTAGE **PAID**
BSC

, -